

Social Security in Review

THE old-age and survivors insurance program was paying monthly benefits to almost 4.7 million persons at the end of August—an increase of 71,500 from the number a month earlier. This was the largest increase for any month since August 1951. Benefits were being paid at a monthly rate of \$166.4 million—\$4.1 million more than at the end of July and a greater increase than in any other month since November 1950.

The more-than-normal increase in August in the number of monthly benefits being paid was due chiefly to the large number of awards to retired workers who had postponed filing for benefits until the third quarter of 1952. By deferring such action, they were able to acquire 6 quarters of coverage after 1950, which are needed in order to use the new benefit formula in the 1950 amendments. All their wages in those 6 quarters were counted in figuring their old-age insurance benefit amounts, since the 1952 amendments permit immediate use, for this purpose, of wages up to the quarter in 1952 in which the person claimed his benefits. Under the 1950 amendments, wages in the two calendar quarters preceding the quarter in which application for benefits is filed would have been excluded in the initial benefit computation. Thus, in August, these benefits would have been arrived at through use of wages in the 12 months of 1951 and a statutory minimum divisor of 18 months. These initial amounts would, of course, have been recomputed 6 months later to take into account

the wages in the 6 months preceding the quarter of filing. The resulting larger benefits would have been payable prospectively, and the difference between the recomputed and initial benefits would have been payable retroactively to the date of entitlement to the initially computed benefits. Because of the 1952 amendments, however, full-rate benefits computed under the new formula (using only earnings after 1950) were awarded in August for the first time.

The unusually large increase in the total monthly amount of benefits resulted both from the larger number of awards and from the higher benefit amounts produced by use of the new formula. Payments for August are the last to be made at the old rates prescribed by the 1950 amendments, since the increased benefits provided by the 1952 amendments are first effective for the month of September.

Lump-sum death benefits totaling \$4.7 million were awarded to 33,800 persons in August.

THE DOWNWARD TREND in the number of persons receiving assistance was resumed in August after the temporary July increase that had been due in large part to the steel strike. Families that came on general assistance in July because of strike-created unemployment began leaving the rolls when the workers were reemployed after the settlement of the dispute in late July. Because of the time lag in reemployment and in the receipt of the first pay checks, however, some of the families were still on the rolls in August. The 3.0-percent decrease

in general assistance from July to August did not quite reduce the caseload to the June level. Recent trends were continued in the other assistance categories, with small but widespread declines in the caseloads for old-age assistance and aid to dependent children, the usual increase in the number of recipients of aid to the permanently and totally disabled, and a small rise in the number receiving aid to the blind.

Total expenditures for public assistance also dropped again in August. The decrease of \$1.5 million more than offset the increase in July and reduced the monthly expenditures to less than \$190 million for the first time in 8 months. Decreases occurred in total payments in general assistance, aid to dependent children, and old-age assistance. The cost of the growing program of aid to the permanently and totally disabled continued to rise, and expenditures for aid to the blind increased slightly.

A decrease of \$2.03 in average payments to general assistance cases reflects at least in part the large number of family cases leaving the rolls following the settlement of the steel strike. Averages in Minnesota, Ohio, and Pennsylvania, which were among the States whose general assistance rolls were most affected by the labor dispute, decreased \$5.49, \$4.32, and \$14.57, respectively. In the other programs, average payments were higher in August than in July in most States, but for the country as a whole the average varied only 3-13 cents from the previous month.

In Oklahoma, maximums on pay-

ments for aid to dependent children were removed, and revised standards of assistance went into effect for that program on August 1. Because of insufficient funds, however, only 80 percent of need could be met. The net result was a decrease of \$2.41 in the average payment to families receiving aid to dependent children. This is in sharp contrast to the increases of \$5-11 in the average payments for old-age assistance, aid to the blind, and aid to the permanently and totally disabled in the previous month, when new standards for these programs went into effect.

In South Carolina a change in the method of determining need, which appreciably affects coverage as well as payments, accounted for a 6-percent drop in the number of families receiving aid to dependent children and a decrease of \$6 in the average payment to these families. This action was taken to keep expenditures within funds available for the fiscal year.

INDUSTRIAL ACTIVITY picked up quickly after the strike in the steel industry was settled late in July. Largely as a result of the upswing in employment, though partly because of seasonal influences, the number of claims filed by unemployed workers for benefits under the State unemployment insurance programs showed a substantial decline in August. Initial claims dropped by 52.0 percent to 715,600—a total less than that in any other month since March 1951 and 24 percent less than that a year earlier. The decline was general; every State reported fewer claims than in July. Thirty-eight States reported fewer weeks of unemployment claimed, which represent continuing unemployment; the total of 4,679,600 for the Nation was 11.8 percent less than in July but 7.6 percent greater than in August 1951.

The average weekly number of claimants receiving unemployment insurance benefits rose 12.5 percent above the July average to 979,900. The average weekly benefit of \$24.06 paid for total unemployment in August was the highest in the history

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Selected current statistics

[Corrected to Oct. 9, 1952]

Item	August 1952	July 1952	August 1951	Calendar year	
				1951	1950
Labor Force ¹ (in thousands)					
Total civilian.....	63,958	64,176	64,208	62,884	63,096
Employed.....	62,354	62,234	62,630	61,005	59,987
Covered by old-age and survivors insurance ²					36,164
Covered by State unemployment insurance ³	35,100	34,300	35,200	34,838	32,771
Unemployed.....	1,604	1,942	1,578	1,879	3,142
Personal Income ⁴ (in billions; seasonally adjusted at annual rates)					
Total ⁵	\$267.1	\$263.9	\$256.7	\$254.1	\$226.1
Employees' income ⁶	181.3	177.6	171.4	170.1	145.9
Proprietors' and rental income.....	51.8	52.2	51.5	50.6	45.2
Personal interest income and dividends.....	21.4	21.3	20.5	20.4	19.5
Public aid ⁷	2.3	2.3	2.3	2.3	2.4
Social insurance and related payments ⁸	8.0	7.8	7.0	7.0	6.6
Veterans' subsistence allowances ⁹ and bonuses.....	.5	.7	1.1	1.2	2.2
Miscellaneous income payments ¹⁰	2.1	2.3	2.9	2.5	4.1
Old-Age and Survivors Insurance					
Monthly benefits:					
Current-payment status: ¹¹					
Number (in thousands).....	¹² 4,680	4,608	4,177		
Amount (in thousands).....	¹³ \$166,400	\$162,297	\$148,119	\$1,884,531	\$1,018,149
Average primary benefit.....	(12) \$41.89	\$41.89	\$42.29		
Awards (in thousands):					
Number.....	108	32	119	1,336	963
Amount.....	(12) \$967	\$967	\$3,713	\$42,282	\$26,224
Unemployment Insurance ¹					
Initial claims (in thousands).....	716	1,492	942	10,836	12,281
Weeks of unemployment claimed (in thousands).....	4,680	5,308	4,350	50,393	78,604
Weeks compensated (in thousands).....	4,116	4,006	3,685	41,599	67,900
Weekly average beneficiaries (in thousands).....	980	871	801	797	1,303
Benefits paid (in millions) ¹⁴	\$95	\$89	\$75	\$840	\$1,377
Average weekly payment for total unemployment.....	\$24.06	\$22.68	\$21.21	\$21.08	\$20.79
Public Assistance					
Recipients (in thousands):					
Old-age assistance.....	2,646	2,650	2,732		
Aid to dependent children:					
Families.....	572	578	612		
Children.....	1,490	1,501	1,567		
Aid to the blind.....	98	98	97		
Aid to the permanently and totally disabled.....	151	148	111		
General assistance.....	297	307	319		
Average payments:					
Old-age assistance.....	\$15.59	\$15.49	\$15.67		
Aid to dependent children (per family).....	76.28	78.41	73.10		
Aid to the blind.....	60.68	60.62	46.82		
Aid to the permanently and totally disabled.....	46.11	46.19	44.46		
General assistance.....	46.40	48.43	45.80		

¹ Continental United States only. Estimated by the Bureau of the Census, except as noted. Monthly employment figures represent specific week and annual figures, average week (unemployment insurance data represent pay period instead of week).

² Estimated by the Bureau of Old-Age and Survivors Insurance. Data for 1951 and 1952 not available.

³ Data from the Bureau of Employment Security, Department of Labor.

⁴ Data from the Office of Business Economics, Department of Commerce. Continental United States, except for employees' income, which includes pay of Federal civilian and military personnel in all areas.

⁵ Beginning January 1952, social insurance contributions from the self-employed excluded from total but not deducted from proprietors' income.

⁶ Civilian and military pay in cash and in kind, other labor income (except workmen's compensation), mustering-out pay, terminal-leave pay, and Government contributions to allowances for dependents of enlisted personnel. Excludes employee contributions under social insurance and related programs.

⁷ Payments to recipients under the 4 special public assistance programs and general assistance.

⁸ Includes old-age and survivors insurance benefits; railroad, Federal, State, and local retirement benefits; veterans' pensions and compensation; workmen's compensation; State and railroad unemployment insurance and temporary disability benefits; and readjustment allowances to veterans under the Servicemen's Readjustment Act.

⁹ Under the Servicemen's Readjustment Act.

¹⁰ Includes payments under the Government life insurance, national service life insurance, and military and naval insurance programs, the Government contribution to nonprofit organizations, business transfer payments, and recoveries under the Employer's Liability Act for railroad workers and seamen.

¹¹ Benefit in current-payment status is subject to no deduction or only to deduction of fixed amount that is less than the current month's benefit; calendar-year figures represent payments certified.

¹² Partly estimated.

¹³ Not available.

¹⁴ Monthly amounts, gross; annual amounts adjusted for voided benefit checks and benefit refunds.

Hospitalization Insurance and Hospital Utilization Among Aged Persons: March 1952 Survey

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Current, factual information has been lacking on many points concerned with illness as a cause of insecurity among aged persons. To obtain basic Nation-wide information on some of these matters, a special survey was made in March 1952 through the medium of the monthly Current Population Survey made by the Bureau of the Census. The data collected concern the extent to which persons in the noninstitutional population aged 65 and over own hospitalization insurance, the amount of hospital care they receive, and the methods and resources used to meet their hospital bills. The results of the survey will be published in a monograph, now in preparation; the major findings are summarized in the article that follows.

IT IS now widely recognized that the costs of hospital and other medical care create serious economic problems for aged persons as for others, and that people need protection against these costs. Indeed, the need for distribution of medical costs among groups of people and over periods of time—through insurance, taxation, or both—is presumably greater for the aged than for younger persons, because older people have more-than-average amounts of illness and less-than-average financial resources.

With respect to hospital care for the aged, three basic assumptions have had rather wide acceptance: (1) That older people need more care per capita than the population generally, reflecting the relatively higher morbidity rates of the advanced ages; (2) that they are not receiving the care they need, for many reasons—including lack of hospital resources in many communities, insufficiency

of less expensive facilities suitable for the care of aged persons who need medical supervision but not care for acute illness, limited ability to pay for hospital and other medical care, and inadequate public provisions for hospital care for needy and medically needy persons in many parts of the country; (3) that only a small proportion of the older persons have substantial or comprehensive insurance protection against hospital and other medical costs, because the common forms of voluntary insurance are not readily available to people past age 65 or are purchasable only at prices beyond their means.

These have remained largely assumptions because current factual information has been either fragmentary or completely lacking. Indeed, there has been no substantial quantitative information of current reliability concerning hospital utilization by older persons in the United States, except for limited data concerning needy or other special groups. As a result, it has not been possible to make a careful evaluation of current circumstances and needs of the aged or to undertake altogether reliable program planning for their hospital care, though their lack of economic security when confronted

by expensive illness has been plainly evident and many of its consequences have been recognized.

Method of the Survey

To assemble some basic Nation-wide information on the ownership of hospitalization insurance by the population aged 65 and over and on the receipt of hospital care by insured and noninsured individuals in those age groups, a special survey was made in March 1952. The field survey was made for the Social Security Administration by the Bureau of the Census, in connection with its regular monthly Current Population Survey that is designed to assemble, on a sample basis, national information concerning the civilian noninstitutional population of the United States. Although designed primarily to provide current statistics concerning employment and unemployment for the *Monthly Report on the Labor Force*, the Current Population Survey is frequently used for special surveys on a wide variety of subjects that lend themselves to inquiry through a scientifically selected sample of households throughout the country.¹

The Bureau of the Census added to its schedule for the March 1952 survey a series of special questions. These were asked of, or about, persons aged 65 or over in the 25,000 households that constitute the representative survey sample. About 6,000 persons aged 65 and over are among the 60,000 aged 14 and over surveyed monthly. The data collected included,

¹For a detailed description see Morris H. Hensen and William N. Hurwitz, *Sampling Methods Applied to Census Work*, Bureau of the Census, 1946; and *Concepts and Methods Used in Current Labor Force Statistics Prepared by the Census Bureau*, Labor Force Memorandum No. 5, Bureau of the Census, November 1950.

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in addition to the answers to the special questions on insurance ownership and hospital experience, the items covered in the regular monthly inquiries concerning age, sex, race, occupation, industry, and place of residence. Thus, the answers to the special questions could be related to these basic characteristics of the individuals.

The special questions asked of, or about, any person aged 65 or over located in the household were as follows: (1) "Does _____ have hospitalization insurance or belong to a plan that covers all or part of the costs of hospitalization?" (2) "Was _____ a patient in a hospital any time during 1951?" If the reply to the second question was in the affirmative, it was followed by (3) "How many days, altogether, was _____ in the hospital in 1951?" (4) "What is the name of the hospital?" and (5) "How was the hospital bill taken care of?"

The interviewers were instructed to exclude "accident only" and "weekly indemnity" ("cash sickness") insurance. The name of the hospital was requested to enable the schedule editors to exclude hospitalization in mental and tuberculosis institutions without having the interviewers ask probing questions. Care in nursing homes, convalescent homes, or homes for the aged and for incurables was excluded. The final data were confined to care in general and special (short-term) hospitals, regardless of type of control, so that Federal, State, county, city, and private nonprofit and proprietary hospitals were included.

Limitations of the Data

Data collected through a sample are subject to sampling variability. In the present study, the range of possible sampling variability is of known magnitude and can be taken into account when interpreting the results. In addition to sampling variability, there were possible inaccuracies because of the respondent's incomplete knowledge or unreliable memory.

It was recognized in advance that many survey respondents might have faulty ideas about the hospital insurance they owned, especially if an

insurance claim had not been filed, and that there might be some misstatement of the extent of insurance protection. Since the survey could not look into the details of insurance policies, no attempt was made to ascertain the precise scope of the insurance owned or of the kinds and amounts of benefits provided. Consequently, persons reported as owning hospitalization insurance are regarded as having some hospitalization insurance, whether comprehensive or limited in the protection it provides.

Ownership of insurance was recorded as of the survey date, and the ratios of insured persons to all persons aged 65 and over are therefore as of March 1952. When calculating hospitalization rates with reference to insured status, it was assumed that the insured status reported in March 1952 had been continuously maintained in 1951. To the extent that some persons who were hospitalized in 1951 and had insurance then did not have it in March 1952, a slight error arises. However, no non-insured persons in March 1952 reported using insurance to pay hospital bills in 1951. In the converse situation it is unlikely that—in this surveyed population of older persons—many persons who were hospitalized in 1951 and did not have insurance then would have obtained it by March 1952.

Responses concerning the occurrence of a hospital stay and its length are believed to be substantially accurate, though in some instances they may be faulty. The returns are probably highly accurate as to hospital admissions, especially because there were relatively few multiple admissions per surveyed person in the course of the year, but they may contain both overstatements and understatements, probably of offsetting magnitudes, on the number of days spent in the hospital.

A more important limitation on the data concerning hospital care results from the fact that the interviews were held in March 1952 and the data sought were for hospital care received in 1951. As in other surveys that collect information retroactively, this method can provide reasonably accurate information on the amount of hospital care received

by the surveyed population. No error results if the findings are used as an indication of the care received in 1951 by that population. If, however, the results are to be used to indicate the amount of hospital care furnished during 1951 by all the hospitals of the country to all persons who were aged 65 and over at the time they received the care, adjustments must be made.

Such an adjustment is especially necessary with respect to the care furnished in 1951 to persons who were no longer living in March 1952 and therefore not in the surveyed population. The adjustment is of considerable consequence with respect to older persons, because of their relatively high death rates and the relatively large amount of hospital care furnished to those who die in the course of a year. Rates that show the amount of hospital care furnished in 1951 to all persons aged 65 and over, including decedents, are presented after the rates for the March 1952 population have been given in detail.

The Bureau of the Census sample relates to all civilians living within the continental limits of the United States, except inmates of penal institutions, mental institutions, homes for the aged, infirm, and needy, and similar places. The findings are therefore applicable only to the civilian noninstitutional population. Statistical tests indicate that omission of the institutional population aged 65 and over in the survey month—approximately 1 million persons—has only a negligible effect on the hospital utilization rates. This group received such a small amount of care from general and special (short-term) hospitals in 1950, in comparison with those in the noninstitutional population, that hardly any adjustment is needed in arriving at an estimate of total hospital care in such hospitals for all persons aged 65 and over.

Ownership of Hospitalization Insurance

Since the ownership of hospitalization insurance may affect the rate or extent of hospitalization substantially, the findings with respect to insurance are presented first.

The survey indicates that of the 12.0 million persons in the noninstitutional population aged 65 and over in March 1952, about 3.2 million or 26.3 percent had some hospitalization insurance. Table 1 shows the percentage distribution of the 12.0 million with respect to age, sex, race, and other characteristics; it also shows, as percentages of the 12.0 million persons, the number in each subgroup who had hospitalization insurance. The uneven distribution of insurance is evident in many of the subgroups. Several subgroups have a much higher or a much lower proportion insured than 1 in 4—the average for the whole population. Nearly every category in the age bracket 65-69, and all the age-sex categories "in the labor force," have more than 1 in 4; the nonwhite groups, the farm residents, and those "not in the labor force" have less than 1 in 4.

The percentage distribution of the 3.2 million persons having some hospitalization insurance is shown in table 2. The points noted earlier about the distribution of insurance ownership are even clearer when tables 1 and 2 are compared. Though men constituted 47 percent of the total survey group in March 1952, they represented 54 percent of those with some insurance. Persons aged 65-69 made up 40 percent of the total but 55 percent of the insured group. The nonwhite population accounted for 7 percent of the total but only 3 percent of the insured population. For farm residents, the corresponding percentages were 15 and 9; for persons in the labor force, 23 and 39; and for those not in the labor force, 77 and 61.

Age, sex, and race.—The extent and distribution of hospitalization insurance by age, sex, and race are summarized in table 3. As noted earlier, 26.3 percent of the survey group reported having some hospitalization insurance in March 1952. About 30 percent of the men and 23 percent of the women were protected by some kind or amount of insurance against hospital bills. In contrast to 27.5 percent of the aged white population, only 10.5 percent of the aged nonwhite population reported owning insurance.

The prevalence of insurance own-

Table 1.—Noninstitutional population aged 65 and over, by selected characteristics and by ownership of hospitalization insurance, March 1952

Population group	Percentage distribution, by age group				Number aged 65 and over (in thousands)
	65 and over	65-69	70-74	75 and over	
Total.....	100.0	40.1	27.9	32.0	12,006
With some insurance.....	26.3	14.5	6.9	4.8	3,188
Sex:					
Male.....	46.8	19.5	13.1	14.2	5,620
With some insurance.....	14.2	8.2	3.7	2.3	1,705
Female.....	53.2	20.6	14.8	17.8	6,386
With some insurance.....	12.1	6.4	3.2	2.6	1,483
Race:					
White.....	92.7	36.9	25.9	29.9	11,128
With some insurance.....	25.5	14.1	6.8	4.7	3,062
Nonwhite.....	7.3	3.2	1.9	2.2	878
With some insurance.....	0.8	0.5	0.1	0.2	96
Residence:					
Urban.....	63.6	26.1	17.5	30.0	7,640
With some insurance.....	19.3	11.0	5.0	3.3	2,323
Rural-nonfarm.....	21.0	7.7	5.9	7.3	2,522
With some insurance.....	4.6	2.3	1.2	1.1	555
Farm.....	15.4	6.3	4.4	4.7	1,844
With some insurance.....	2.3	1.3	0.7	0.4	280
Employment status:					
In the labor force.....	23.2	14.0	6.2	3.0	2,788
With some insurance.....	10.2	6.9	2.4	0.9	1,225
Male.....	19.1	11.3	5.3	2.5	2,296
With some insurance.....	8.5	5.7	2.0	0.7	1,021
Female.....	4.1	2.7	0.9	0.5	492
With some insurance.....	1.7	1.2	0.4	0.1	204
Not in the labor force.....	76.8	26.1	21.7	29.0	9,218
With some insurance.....	16.1	7.6	4.5	4.0	1,933
Male.....	27.7	8.2	7.8	11.7	3,324
With some insurance.....	5.7	2.5	1.7	1.5	684
Female.....	49.1	17.9	13.9	17.3	5,894
With some insurance.....	10.4	5.2	2.8	2.4	1,240

ership decreased with advancing age among both men and women.² Among white men, for example, the reported ownership of insurance decreased from 44 percent for those aged 65-69 to 30 percent for those aged 70-74 and to 16 percent for those aged 75 and over. The proportions with insurance were consistently lower among women than among men. The rates for white women were 33 percent insured at ages 65-69, 23 percent at ages 70-74, and 15 percent at ages 75 and over. The difference between white men and white women in the relative number insured, which was substantial at ages 65-69 (44 percent as against 33 percent) was relatively unimportant at the highest ages (approximately 15 percent in both instances). As will become clear later, these figures reflect the association of insurance ownership and gainful employment and the fact that at the highest ages few of either sex are employed.

Urban-rural residence.—Hospitalization insurance was most general

² The only exception appears in the case of nonwhite men, a relatively small group for which there was a large probable error in the survey sample.

among urban residents and least among persons living on farms (table 4). The percent with some hospitalization insurance in the total urban group (30 percent) was twice that for farm residents (15 percent). In large measure, these relationships in insurance ownership according to residence also obtained in the age groups 65-69 and 70-74 and for men and women separately. In the highest age group, 75 and over, they still obtained for both sexes but not for men or for women separately. Among the men the residence differences in insurance ownership were much reduced, and among the women they were much increased; the insurance percentage for women on farms was only one-seventh as large as for those in urban areas.

Employment status.—Before considering the ownership of hospitalization insurance in relation to employment status, it is important to recall the atypical characteristics of the aged population with respect to this factor. In the first block of columns in table 5, it is seen that only 41 percent of the men and only 8 percent of the women aged 65 and over were in the labor force in March 1952. That

Table 2.—Insured noninstitutional population aged 65 and over, by selected characteristics, March 1952

Population group	Percentage distribution, by age group			
	65 and over	65-69	70-74	75 and over
Sex:				
Both sexes	100.0	55.4	26.3	18.3
Male	53.9	31.2	14.1	8.6
Female	46.1	24.2	12.2	9.7
Race:				
White	97.0	53.6	25.7	17.7
Nonwhite	3.0	1.8	0.6	0.6
Residence:				
Urban	73.5	41.8	19.0	12.7
Rural-nonfarm	17.6	8.8	4.6	4.2
Farm	8.9	4.8	2.7	1.4
Employment status:				
In the labor force	38.7	26.2	9.2	3.3
Male	32.3	21.7	7.8	2.8
Female	6.4	4.5	1.4	0.5
Not in the labor force	61.3	29.2	17.1	15.0
Male	21.6	9.5	6.4	5.7
Female	39.7	19.7	10.7	9.3

is, 6 out of 10 men and 9 out of every 10 women were not in the labor force; they were classified as engaged in "keeping house," "unable to work," or "other" (meaning, generally, retired from gainful work). In the second block of columns, it is seen that 44.5 percent of the men in the labor force, but only 20 percent of those not in the labor force, reported having some hospitalization insurance. Among women the percentages with some insurance were similar (41 percent and 21 percent, respectively), though only 8 percent were actually in the labor force.

Among the employed men, 19.5 percent of those employed in agriculture had some hospitalization insurance, a figure similar to that for all insured men not in the labor force (20 percent), and the percentage shows no substantial decline with advancing age. In contrast, more than 55 percent of the aged men employed in nonagricultural industries were reported as having some insurance; the percentage declines sharply with advancing age (from 61 percent at ages 65-69 to 39 percent among those aged 75 and over) but remains consistently above that for men not in the labor force. Among men not in the labor force, the highest insurance percentage is found among those in the ages 65-69 and classified as "other" (33 percent); this percentage, too, declines—to only 15 percent for the oldest group.

Among women not in the labor force, the largest group numerically and the group with the highest percentage of insured persons was that classified as "keeping house." This group probably included most of the women whose insured status resulted from their being dependents of insured men, a fact applying particularly to those aged 65-69. Almost 29 percent of the women in this age group and not in the labor force were covered by some hospitalization insurance, but only 14 percent at ages 75 and over had some insurance.

One subclassification of persons not in the labor force deserves special note. Only 10-11 percent of those in the category "unable to work" had some hospitalization insurance; and the proportion declined from 14-17 percent at ages 65-69 to 9 percent for those aged 75 and over.

Comment on insurance ownership.—From the preceding analysis, several key facts emerge with regard to the distribution of hospitalization insurance in the population aged 65 and over. It has become apparent that variations in insured status—especially the higher insurance percentages among men than among women, the higher percentages in the lowest of the three age groups, and the higher percentages among urban than among rural residents—are all related to the wider prevalence of insurance ownership among persons in the labor force and particularly among those employed in nonagricultural industries. In view of the decreasing participation in the labor force as age advances, the almost negligible proportions of women aged 65 and over who are gainfully employed, and—with rising age—the increasing preponderance of women among those not in the labor force, the interrelationship of insurance ownership and of the opportunity to purchase insurance by reason of employment becomes increasingly clear.

The "opportunity" to purchase hospitalization insurance has two facets for persons aged 65 and over—their eligibility for such insurance and their ability to pay the premiums. More than two-thirds of the hospitalization insurance now in force in the United States has been sold as group insurance, principally by Blue

Cross plans and by commercial companies. For older persons as for others, participation in a group—usually a group of employed persons—is a necessary condition to securing the protection afforded by group insurance. Individual insurance policies, although not requiring that the older person belong to a recognized group, may also require work at steady employment as a condition of eligibility. An exception to these generally practiced underwriting rules is the conversion privilege available in a number of Blue Cross plans; this procedure permits older persons, when they retire, to convert their group membership to individually purchased Blue Cross insurance, usually with a higher premium. By its very nature, individually purchased insurance is not accompanied by an employer contribution toward premiums, whether the policy is obtained from a Blue Cross plan or a commercial company, and the premium is higher for the same or even for lesser insurance protection than it is with group insurance.

Fifty-five percent of the insured persons were in the age group 65-69, and 31 percent were men in these ages, though this age group contains only 40 percent of the 12 million people aged 65 and over in the noninstitutional population and men represented less than 20 percent of the 12 million. Twenty-two percent of all the insured persons were men aged 65-69 in the labor force, although this group equaled only 11 percent of the aged population. Among men aged 65-69 who were

Table 3.—Percent of persons who had some insurance, by age, sex, and race, noninstitutional population aged 65 and over, March 1952

Sex and race	Age group			
	65 and over	65-69	70-74	75 and over
Both sexes	26.3	36.4	24.8	15.0
White	27.5	38.3	26.1	15.6
Nonwhite	10.5	14.7	7.0	7.6
Male	30.2	42.3	28.2	15.8
White	31.4	43.6	29.9	16.2
Nonwhite	15.7	25.0	8.3	10.3
Female	22.8	30.9	21.7	14.4
White	24.2	33.3	22.8	15.1
Nonwhite	6.3	7.2	5.5	5.5

Table 4.—Percentage distribution of noninstitutional population aged 65 and over by age and by urban-rural residence and the percent of persons who had some insurance, March 1952

Residence and sex	Age group			
	65 and over	65-69	70-74	75 and over
Percentage distribution of population				
Total.....	100.0	40.1	27.9	32.0
Urban.....	100.0	41.0	27.5	31.5
Rural-nonfarm.....	100.0	36.9	28.2	34.9
Farm.....	100.0	40.9	28.7	30.4
Percent with some insurance				
Total.....	26.3	36.4	24.8	15.0
Urban.....	30.4	42.4	28.6	16.7
Rural-nonfarm.....	22.0	29.8	20.4	15.0
Farm.....	15.2	20.4	15.6	8.0
Male.....	30.2	42.3	28.2	15.8
Urban.....	35.8	50.0	33.8	16.7
Rural-nonfarm.....	25.7	35.4	24.7	15.8
Farm.....	16.7	21.3	15.2	12.6
Female.....	22.8	30.9	21.7	14.4
Urban.....	26.0	35.3	24.4	16.6
Rural-nonfarm.....	18.4	24.2	16.4	14.3
Farm.....	13.5	19.6	10.2	2.4

employed in nonagricultural industries, 61 percent had some insurance. This concentration is in turn largely responsible for the relatively high rate of insurance ownership among urban residents aged 65-69 and at all ages 65 and over.

Commonly faced with employment as a condition of maintaining group insurance, and with relatively high premiums (with no employer contribution) as a condition of obtaining individual insurance, persons past age 65 and not in the labor force have less opportunity than most persons to obtain hospitalization insurance. Nearly 77 percent of the aged population were not in the labor force, but only one-fifth of these persons had some insurance. Individual insurance usually carries limitations with respect to preexisting diseases or defects, so that its value in furnishing insurance protection may be highly limited. The higher risk rates of older persons are reflected in the higher premiums charged them for commercial individual policies, though this statement is not applicable to Blue Cross. It is not surprising, therefore, that those who can readily participate in groups and who

have income from gainful employment, or dependents of such persons, have most of the hospitalization insurance in the population aged 65 and over.

Hospital Care Received in 1951 by the March 1952 Noninstitutional Population

The special survey questions were designed to determine how many aged people went into general or special (short-term) hospitals within a 12-month period, how long they stayed on the average, and how many days of hospital care (per 100 aged persons in the population) were received. The data on hospital utilization were correlated with the insured status of the population and of the patients in order to measure the relationship between insurance protection and hospital utilization.

As noted earlier, the data on hospital utilization in table 6 refer to hospitalization received in 1951 by all persons aged 65 and over and not in institutions who were alive and therefore included in the sample surveyed in March 1952. A second series of rates (table 8) takes into account persons aged 65 and over who became 65 or died after being admitted to a hospital in 1951.

Age, sex, and race.—In table 6, the findings of the survey on admissions, length of stay, and days of hospital care are presented for the total surveyed population—insured and noninsured. The average admission rate

for the total group was 7.3 per 100 persons. The distribution by age, sex, and race shows that insured persons had uniformly higher admission rates than the noninsured, except for the small group of insured women aged 75 and over. Admissions among insured persons varied by age and sex from 6.0 to 15.0 per 100, and averaged 10.3. The corresponding range for the noninsured was not so wide, varying from 5.3 to 7.9 per 100, with an average of 6.3. Since there were more persons without insurance than with it, the admission rate for the entire group is closer to that of the noninsured than the insured. In almost all instances the admission rate for women was lower than the comparable rate for men. The rate was much lower for the nonwhite than for the white group, but this difference resulted wholly from the divergence among the noninsured.

Insured persons and the noninsured showed large differences in average length of stay, as in admission, but the relationship is reversed; the average duration was 14.7 days of care for the insured and 27 days for the noninsured. For the two groups combined, it was 22.5 days of care. When age and sex differences are considered, there was not much variation in the average number of hospital days per admission among the insured, with the two exceptions of the nonwhite group (21.8 days) and women aged 75 and over (9.1 days). Except in this last age group,

Table 5.—Percentage distribution of noninstitutional population aged 65 and over by age, sex, and employment status, and the percent of persons who had some insurance, March 1952

Employment status	Percentage distribution of population, by age group				Percent with some insurance, by age group			
	65 and over	65-69	70-74	75 and over	65 and over	65-69	70-74	75 and over
Male, total.....	100.0	41.6	28.0	30.4	30.2	42.3	28.2	15.8
In the labor force.....	40.9	24.2	11.3	5.4	44.5	30.9	38.3	29.3
Employed.....	39.2	22.8	11.0	5.4	45.2	32.2	38.2	29.7
In agriculture.....	11.2	5.1	3.7	2.3	19.5	22.5	16.5	17.5
In nonagricultural industries.....	28.2	17.7	7.3	3.1	55.4	60.9	49.3	38.8
Unemployed.....	1.7	1.4	0.3	0.0	26.8	23.3	44.4	0.0
Not in the labor force.....	59.1	17.4	16.7	25.0	30.4	30.5	21.4	12.8
Keeping house.....	0.5	0.2	0.1	0.2	15.4	33.3	10.6	8.5
Unable to work.....	14.3	3.2	3.1	8.0	10.9	17.2	10.6	8.5
Other.....	44.4	14.0	13.6	16.8	23.5	33.4	23.9	15.1
Female, total.....	100.0	38.8	27.7	33.5	22.8	30.9	21.7	14.4
In the labor force.....	7.7	5.1	1.7	1.0	41.2	44.0	43.1	23.3
Not in the labor force.....	92.3	33.7	26.1	32.5	21.3	28.9	20.3	14.1
Keeping house.....	78.7	31.5	23.8	23.4	22.8	29.5	21.0	15.7
Unable to work.....	9.8	1.4	1.3	7.1	10.1	13.6	14.0	8.6
Other.....	3.8	0.8	1.0	2.0	18.0	32.0	13.3	14.9

insured women stayed longer in the hospital on the average than insured men. One group—men aged 70-74—distorted the averages of the noninsured. A relatively small number of admissions among this group accounted for a disproportionate number of days of care, because some of the men remained in the hospital a full year. With this one exception, women stayed longer on the average than men in all instances among the noninsured, as among the insured.

Even with their higher-than-average admission rates, insured persons had a somewhat smaller amount of hospital care (days per 100 persons) than the noninsured, because their average length of stay per admission was so much below that for the noninsured. The whole group received 165 days' care per 100 persons; the insured among them used 151 days and the noninsured used 170 days. Among the noninsured, nonwhite persons had less than half as much hospital care as white persons; among the insured, the relationship was nearly the reverse. Women, despite their longer average stay per admis-

sion, received fewer days of hospitalization per 100 than men, but there are variations in this relationship when insured and noninsured persons are compared.

It is important to note that the data in table 6 show a striking lack of progression in the rates with advancing age. Regardless of which of the three types of rates is examined, no regular or steady progression is seen. This condition is equally true for any group, whether insured or not. If only the two age groups 65-69 and 75 and over are compared, however, there is evidence of increased hospital utilization for the oldest group; but the rates for the age group 70-74 are sometimes higher and sometimes lower than the rates for the other age groups. A partial explanation for this finding, as will be discussed later, lies in the fact that persons who died during 1951 were not included in the survey.

Urban-rural residence.—The three residence categories—urban, rural-nonfarm, and farm—proved to be markedly different in the extent to which they used hospital facilities.

Measured in days of hospital care per 100 persons, the urban population received the largest amount of hospital care—184 days per 100 persons—and the farm population the least—86 days per 100 persons.

One of the most striking points to observe in the first block of table 6 is the relatively high admission rates of the insured farm groups; since these admissions were accompanied by average stays only moderately less than those for the other groups, the resulting days of hospital care per 100 persons (208) were higher than the average for all groups. The noninsured farm group, much larger than the insured group, had both low admission rates and very short average stays; they had only 5.5 admissions per 100 persons, the average stay was less than 12 days, and the members of this group received only 64 days of hospital care per 100 noninsured.

The urban and rural-nonfarm groups were not greatly different in the number of days of hospital care per 100 persons received in 1951, but the similarity tends to conceal the fact that their admission rates and average lengths of stay show substantial differences. When the insured population is considered, the urban and the rural-nonfarm groups also had similar days of hospital care per 100 persons, and in this instance similar admission rates and durations. This similarity did not obtain, however, for the separate sex subgroups; urban men had a somewhat lower admission rate and a shorter average stay than rural-nonfarm men, but the reverse was true for women.

Among the noninsured the urban group averaged 12 more days per admission than the rural nonfarm group, although its rate of admission was lower. The long stays resulted in 34 days of care per admission in the noninsured urban group and 201 days per 100 noninsured persons.

It is evident that any consideration of hospital utilization by different residence groups must take into account both the extent of insurance ownership and the sex of the recipients of hospital care.

Employment status.—It will be noted, in the lowest segment of table 6, that admission rates were slightly

Table 6.—Hospital utilization in 1951 among the noninstitutional population aged 65 and over in March 1952, by selected characteristics

Population group	Admissions per 100 persons			Hospital days per admission			Hospital days per 100 persons		
	Total	With some insurance	With no insurance	Total	With some insurance	With no insurance	Total	With some insurance	With no insurance
Age and sex:									
Both sexes.....	7.3	10.3	6.3	22.5	14.7	27.0	165	151	170
65-69.....	7.8	10.2	6.5	18.0	13.9	21.6	141	141	140
70-74.....	6.9	10.6	5.7	31.0	14.9	40.9	213	158	232
75 and over.....	7.1	10.2	6.6	21.5	16.5	22.8	133	168	150
Male.....	8.2	11.6	6.8	22.3	14.6	28.0	184	169	190
65-69.....	9.6	11.8	7.9	14.1	13.3	14.9	135	158	118
70-74.....	6.8	8.7	6.1	41.5	13.2	57.3	283	114	350
75 and over.....	7.7	15.0	6.3	20.6	19.8	20.9	158	208	132
Female.....	6.5	8.8	5.9	22.6	14.7	26.2	148	130	154
65-69.....	6.2	8.0	5.4	23.6	15.1	29.3	146	121	157
70-74.....	6.9	12.8	5.3	21.8	16.3	25.5	151	208	135
75 and over.....	6.7	6.0	6.8	22.3	9.1	24.2	149	54	165
Race:									
White.....	7.6	10.3	6.6	22.4	14.3	27.1	170	148	178
Nonwhite.....	4.1	10.9	3.3	25.1	21.8	26.4	103	237	88
Residence:									
Urban.....	7.1	9.8	6.0	25.8	14.9	33.6	184	145	201
Male.....	8.3	11.2	6.6	25.3	13.9	36.1	210	156	240
Female.....	6.2	8.1	5.5	26.4	16.3	31.6	164	133	175
Rural-nonfarm.....	8.2	9.5	7.8	19.9	15.2	21.6	164	144	169
Male.....	9.3	12.3	8.3	20.6	17.5	22.2	192	215	184
Female.....	7.2	6.8	7.3	19.1	7.6	21.6	137	62	157
Farm.....	7.0	15.2	5.5	12.4	13.7	11.7	86	168	69
Male.....	6.7	12.2	5.6	12.7	13.8	12.2	85	168	64
Female.....	7.2	19.6	5.3	12.1	13.5	11.2	87	266	59
Employment status:									
In the labor force.....	6.4	8.5	4.7	12.6	12.0	13.5	81	102	64
Male.....	6.9	9.2	5.1	12.2	11.8	12.8	85	108	66
Female.....	3.8	5.1	2.8	16.3	13.8	10.5	61	70	55
Not in the labor force.....	7.6	11.4	6.6	25.0	15.9	29.1	190	181	193
Male.....	9.1	15.0	7.6	27.6	17.3	32.9	252	238	250
Female.....	6.8	9.4	6.1	22.9	14.8	26.4	156	139	160

higher and that average length of stay was about twice as high among persons not in the labor force as among those in the labor force. As a result, days of hospital care per 100 were more than twice as many for the former as for the latter.

The concentration of insurance ownership among the employed made the differentiation by insured status of great importance when measuring the hospitalization rates of persons in the labor force and those not in the labor force.

Considering first the insured in the two groups, it is evident that those in the labor force received a much smaller amount of hospital care than those not in the labor force. Their admission rate is lower—8.5 per 100 compared with 11.4—their average stay is 4.0 days shorter per admission, and their days of care per 100 persons are only a little more than half those of insured persons not in the labor force. For the insured women in the labor force the rates are especially low. The highest rate for any insured group is found for men not in the labor force.

Among the noninsured, persons in the labor force had strikingly low rates, in marked contrast to those not in the labor force. The three types of rates are different for men and women; nonworking women enter the hospital less often, remain a somewhat shorter time on the average, and therefore receive many fewer days of hospital care per 100 persons than the nonworking men.

Length of hospitalization.—The average duration of 22.5 hospital days per admission for all hospital cases in the surveyed population and the averages of 15 and 27 days among the insured and noninsured persons conceal the variations in length of individual cases—from 1 day to the whole year (table 7). Of all persons hospitalized, 83 percent had stays of less than 31 days; the comparable figures were 89 percent among the insured and 80 percent among the noninsured. In other words, the proportion of hospitalized persons with less than 31 days was larger among the insured (who had higher admission rates, as shown in table 6) than among the noninsured. For the whole group, hospital stays of less than 31

Table 7.—Hospitalized persons and days of hospital care in 1951, by specified durations and insured status, among the noninstitutional population aged 65 and over in March 1952

Durations	Total	With some insurance	With no insurance
Hospitalized persons, percent.....	100.0	100.0	100.0
Receiving less than 31 days of care.....	82.6	88.7	79.6
Receiving 31-365 days of care.....	17.2	11.3	20.4
Hospital days, percent.....	100.0	100.0	100.0
Persons receiving less than 31 days of care.....	41.2	65.3	33.7
Persons receiving 31-365 days of care.....	58.8	34.7	66.3
Days, to the 31st.....	20.7	20.6	20.7
Days, beyond the 30th.....	38.1	14.1	45.6
Hospitalized persons, percent.....	100.0	100.0	100.0
Receiving less than 61 days of care.....	93.0	97.9	90.4
Receiving 61-365 days of care.....	7.0	2.1	9.6
Hospital days, percent.....	100.0	100.0	100.0
Persons receiving less than 61 days of care.....	59.7	90.6	49.9
Persons receiving 61-365 days of care.....	40.3	9.4	50.1
Days, to the 61st.....	16.7	7.7	19.5
Days, beyond the 60th.....	23.6	1.7	30.6

days accounted for 41 percent of the days of hospital care; among the insured, hospital stays of that duration accounted for more than 65 percent of the days and among the noninsured for only 34 percent.

Seventeen percent of the hospitalized persons stayed in the hospital for more than 30 days in a year, and they received 59 percent of all the days of hospital care—38 percent of them days beyond the thirtieth. Among the insured, the days beyond the thirtieth accounted for 14 percent, and among the noninsured for 46 percent.

Only 7 percent of the hospitalized persons had 61 or more days of hospitalization in the year, but they received 40 percent of all the hospital days of care; more than half of this 40 percent represented days after the sixtieth. Among the persons owning insurance, the 2 percent with long hospitalization received 9 percent of the days of care; 10 percent of the noninsured had 50 percent.

This type of tabulation is useful in indicating the effect of restricting days of hospital care in an insurance plan to a maximum of 30 or 60 days—

or to some other number—in a year. It shows that such limitations do not affect a large proportion of hospitalized persons but may drastically limit the proportion of days covered by insurance, because even relatively few cases with long durations can have a substantial effect on the count of hospital days.

Hospital Care Received by All Persons Aged 65 and Over in 1951

It was noted earlier, in connection with certain limitations to be observed in using the results of the survey, that the data on hospital utilization describe the hospital care received in 1951 by the population surveyed in March 1952. The data are useful in their own right, especially since they invite analyses not hitherto possible for current or recent data. They need adjustment, however, if they are to be used to indicate the amount of care furnished in 1951 by all the hospitals of the country to all persons who were aged 65 and over when they received care. A subtraction must be made for hospital care recorded in the survey for persons who were aged 65 in March 1952 but under that age during part or all of the year 1951, and an addition must be made for hospital care received in 1951 by persons aged 65 and over who died during that year.

The need for these adjustments may be seen even more clearly if we consider a hypothetical situation. Assume the existence of a stationary population of persons aged 65 and over for the year 1951. During the year it will gain persons who complete their sixty-fourth year and become 65. On the average, in the course of 1951, each of these new entrants lives one-half year at the average hospitalization risk rate for persons aged 64, and one-half year at the average risk rate for persons aged 65. Only approximately half the hospital care they receive during the year should therefore be counted as care furnished to persons aged 65 and over. Also, in the course of the year, this stationary population will lose an equal number of persons through death. On the average, each of these decedents lives one-half year in 1951; but their hospitalization is

much higher than is indicated by the risk rate for all persons aged 65 and over—possibly because they have a higher average age than do all persons aged 65 and over, and certainly because the admission rates for decedents are much higher than those for survivors.

The actual aged population differs from this hypothetical one since it increases each year. Almost 1 million persons reach age 65 and about 750,000 die during the year. While the two groups nearly balance in number, the decedents account for a great deal more hospital care than those entering the population group, so that the groups do not offset each other with respect to hospital utilization.

A reduction for those who were under age 65 for part or all of 1951 was made by assuming that those entering the age group 65-69 had admission rates and durations of hospital stay similar to those recorded for the surveyed population at these ages (table 6). These sex-specific rates were applied to one-half the number of men and one-half the number of women who had their sixty-fifth birthday between January 1951 and January 1952.

An addition for decedents involved several steps. First, place of occurrence of death for a 10-percent sample of deaths among persons aged 65 and over was determined separately, by sex, for the three age groups used throughout this study.³ The distribution by place of occurrence was applied to the total number of deaths reported for 1951 for persons aged 65 and over, giving the numbers that occurred in that year in general and special hospitals, in other types of institutions, and at home or in locations other than institutions. Thus, the 750,000 deaths that occurred in 1951 among persons aged 65 and over may be considered in three categories: (a) the 230,000 that occurred in general and special hospitals, (b) the 90,000 that occurred in other institutions—those for mental disease or tuberculosis, nursing homes, prisons,

and so on—and (c) the 430,000 deaths that took place outside institutions.

Next, each death in (a) was counted as one admission; terminal cases admitted to hospitals in 1950 were assumed to offset multiple admissions in 1951 among these decedents. The deaths in (b) were ignored, because these persons were not part of the noninstitutional population and available data indicate that they received only a statistically negligible amount of general and special hospital care in 1951 before entering the institutions in which they died. For those in (c), the age-sex specific hospital admission rates found for the surveyed population (table 6) were applied to half the number of deaths in each age-sex group. Then the estimated number of admissions for each age-sex group in (a) and (c) was assigned the average length of stay reported for the surveyed population, giving the number of hospital days to be added for these decedents.

Admissions and days of care derived from the survey data were then reduced by the estimates for those who reached age 65 in 1951, and they were increased by the estimates for the decedents. These adjusted figures were applied to the 1951 average noninstitutional population aged 65 and over, derived by applying the March 1952 age-sex proportions to the Census Bureau estimates for the 1951 midyear population aged 65 and over (both sexes 11,728,000, men 5,504,000, and women 6,224,000). The adjusted admissions and days of care per 100 persons are shown in table 8.⁴

In the adaptation of the hospitalization data to a concept that reflects all hospital care received by anyone who was aged 65 or over in 1951, the days of care resulting may be slightly overstated or understated for the two adjustments, if the average duration of hospital stay of persons reaching age 65 or of decedents differs much from that of the surveyed population. The probability is in the direction of overstatement with respect to the decedents, but no applicable data on the average length of terminal hos-

pitalized illnesses were readily available to test this point.

Unfortunately, adjustments similar to these for age and sex could not be made for residence, employment status, or insurance ownership.

The figures shown in table 8 indicate, in terms of admissions and days of hospital care, the total amount of hospital care furnished in 1951 by all general and special (short-term) hospitals to all persons in the civilian noninstitutional population aged 65 and over. Such data as are available indicate that only a relatively small amount of care is furnished by these hospitals to the institutional population. The adjusted rates may therefore be regarded as indicative of the hospital care furnished to all persons aged 65 and over.

Omissions for persons aged 64 and additions for the decedents increased the admission rate by 27 percent—from 7.3 to 9.3 per 100 persons. The number of days of care received increased by 24 percent—from 165 to 205 days per 100 persons. The changes in the admission rates and in the hospital days per 100 persons, by age and sex, range from an almost negligible proportion for those aged 65-69 (about 9-10 percent) up to about 40 percent for women aged 75 and over and about 52 percent for men of that age. In this series, both admission rates and rates of hospital days rise regularly with increasing age among the women but not among the men; progression in the latter group is still distorted by the figures for the age group 70-74, which had low admission rates but long average durations.

Methods of Paying Hospital Bills

When making the March 1952 survey, the enumerators were instructed to ask any person aged 65 and over who had been hospitalized how his hospital bill had been met. The alternatives given were (1) by self or spouse, (2) by relatives, (3) through insurance, (4) no charge, and (5) in other ways. More than one method of payment could be indicated, and a fourth of the hospitalized persons did use more than one source or method to meet the bills. The findings have been analyzed by the hospitalized person's age, residence, and

³ Data from the National Office of Vital Statistics sample of 1949 death certificates, analyzed by machine tabulations by the Bureau of Old-Age and Survivors Insurance.

⁴ Since the average length of stay of each admission that was added or subtracted was assumed to be the same as for surveyed population, the length of stay per admission was unchanged by the adjustment and is not shown in table 8.

labor-force status, as well as by sex and insured status, but space does not permit inclusion of the detailed analyses here. The analyses showed that for persons in the age groups 65-69 and 75 and over, however, help from relatives other than the spouse was most common for the age group 70-74; and payment by insurance, or by insurance supplemented by private means, decreased markedly as age advanced.

The rural-nonfarm group, among the different residence categories, received the highest proportion of care with no charge; the proportion was higher for the women than for the men in this group. Among those not in the labor force, 20 percent of the women and 30 percent of the men had care with no charge. Only a small proportion of hospitalized farm residents had care with no charge; the proportion who financed the care themselves or with assistance from relatives was much higher than the average.

More than half the employed men who were hospitalized reported using insurance alone or along with other resources, but only a third of the hospitalized nonworking men used insurance.

Table 9 summarizes some of the findings; it permits comparisons of the sources or methods of payment used by the insured and the non-insured and shows the differences between sources used by men and women in meeting the bills. In the whole group of hospitalized persons, 76 percent used only a single source. Of these, 38 percent met their hospital bills unaided, 14 percent had hospital care with no charge, and 13 percent had adequate hospital insurance (35 percent of the hospitalized persons were covered by some insurance). Among those with insurance (43 percent of the hospitalized men and 27 percent of the hospitalized women), the insurance proved entirely adequate for 46 percent of the men but paid the entire costs for only 18 percent of the women. A greater percentage of non-insured men than noninsured women received care with no charge; relatives assumed entire responsibility for payment for a larger percentage

Table 8.—Hospital utilization in 1951 among the noninstitutional population aged 65 and over in March 1952¹ and among the noninstitutional population aged 65 and over at the time of receiving hospital care,² by sex and age

Sex and age	Admissions per 100 persons			Hospital days per 100 persons		
	Survey population, March 1952	1951 population (adjusted)	Percentage increase	Survey population, March 1952	1951 population (adjusted)	Percentage increase
Both sexes.....	7.3	9.3	27.4	165	205	24.2
65-69.....	7.8	8.6	10.3	141	154	9.2
70-74.....	6.9	8.9	29.0	213	259	21.6
75 and over.....	7.1	10.4	46.5	153	223	45.8
Male.....	8.2	10.5	28.0	184	229	24.5
65-69.....	9.6	10.5	9.4	135	148	9.6
70-74.....	6.8	9.3	36.8	283	337	19.1
75 and over.....	7.7	11.7	51.9	158	241	52.5
Female.....	6.5	8.2	26.2	143	184	29.3
65-69.....	6.2	6.8	9.7	146	159	8.9
70-74.....	6.9	8.7	26.1	151	189	25.2
75 and over.....	6.7	9.4	40.3	149	208	39.6

¹ Confined to the living population aged 65 and over in March 1952.

² Includes persons aged 65 and over who died in

1951, and excludes persons who were aged 64 when hospitalized.

of women than of men.

The second part of table 9 was prepared to reflect the extent to which each source, whether alone or in combination with another source, was used to meet the hospital bill. For the group as a whole, the patient or spouse contributed toward the bill in 59 percent of the instances of hospitalization, meeting it entirely in 38 percent of the cases and contributing to it in 21 percent of the cases. The immediate family (patient, spouse, or relative) assisted 72 percent of the patients to meet the bill. Insurance played a part in 31 percent of the cases. Among the insured, of course, insurance was the principal source, though it was supplemented by other means for 53 percent of the cases and was the only source used for 36 percent. Care with no charge is a negligible factor among insured persons but an important element among those without insurance; 22 percent of the latter had hospital care with no charge.

Insured men had the help of insurance in a greater proportion of cases than insured women. Noninsured men had comparatively less help from relatives than noninsured women and relied more often on care with no charge.

The table shows that even among the insured, with their relatively short stays in the hospital, assistance from the family was needed in the majority of cases of hospitalized illness. Among those with no insurance, help from relatives alone, or in addi-

tion to the contribution of the patient or his spouse, was received by 22 percent of the cases (17 percent of the men and 25 percent of the women).

This table reflects only the experience of those who received hospital care. It must be kept in mind that there were undoubtedly many aged persons, unwilling to call on relatives or to accept free care, who went without such care. This possibility is suggested by the relatively low utilization rates among the noninsured. Once admitted to a hospital, the non-insured have longer-than-average stays; but it is also significant that they have lower-than-average admission rates.

Summary and Conclusions

The results of the survey appear to confirm and now give quantitative dimensions to some widely accepted assumptions regarding the need and receipt of hospital care by the aged and their problems in paying hospital bills.

The major findings about hospitalization insurance in the surveyed population may be briefly summarized as follows. Slightly more than a fourth of the aged population had some hospitalization insurance in March 1952. Whether of comprehensive or limited scope, the insurance was unevenly distributed. Proportionately more men than women had insurance; the white population had proportionately nearly three times as many with insurance as the nonwhite

Table 9.—Method of payment of hospital bills and percent of hospitalized persons, among the noninstitutional population aged 65 and over in March 1952, using specified sources to pay hospital bills, by sex and insured status, 1951

Source of payment	Total			Male			Female		
	Total	With some insurance	With no insurance	Total	With some insurance	With no insurance	Total	With some insurance	With no insurance
Total.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Payment from a single source.....	76.1	45.4	92.8	75.2	54.8	90.9	77.0	30.0	94.1
By person or spouse.....	38.1	6.7	55.1	33.5	6.0	54.5	42.9	8.0	55.5
By relative.....	10.2	1.5	15.0	4.6	—	8.2	16.0	4.0	20.4
By insurance.....	12.6	35.8	—	20.1	46.4	—	4.8	18.0	—
By others.....	1.3	0.7	1.6	2.1	1.2	2.7	0.5	—	0.7
No charges.....	13.9	0.7	21.1	14.9	1.2	25.5	12.8	—	17.5
Payment from multiple sources.....	23.9	54.6	7.2	24.8	45.2	9.1	23.0	70.0	5.9
Payment from single or multiple sources involving: ¹									
Person or spouse.....	58.8	53.7	61.5	57.3	48.9	63.6	59.8	62.0	59.8
Person, spouse, and relative.....	72.2	62.7	77.3	62.9	51.3	71.8	81.1	82.0	81.6
Relative.....	18.1	11.2	21.9	10.8	2.4	17.3	25.5	26.0	25.4
Insurance.....	31.2	88.8	—	39.7	91.7	—	21.9	84.0	—
Others.....	1.6	0.7	2.0	2.1	1.2	2.7	1.0	—	1.4
No charges.....	14.7	1.5	21.9	14.9	1.2	25.5	14.3	2.0	18.9

¹ Not additive.

² Includes a few instances of payment by patient

plus free care, relative plus free care, and relative and other.

population. Such insurance as was owned at the time was heavily concentrated in the age group 65-69 and was most common among urban residents and among persons in the labor force—especially those with nonagricultural employment.

The finding that 26 percent of the civilian noninstitutional population aged 65 and over had some kind or amount of hospitalization insurance in March 1952 may be contrasted with the 56 percent of the civilian population of all ages⁵ and 60 percent of the civilian population under age 65 who were reported as insured at the end of 1951. There was wider ownership of hospitalization insurance among aged persons than had been previously estimated on the basis of fragmentary data, but the survey data confirm that the older population has lagged far behind the general population in the extent to which they have acquired some insurance protection against the costs of hospitalization.

The frequency of hospitalization and the amount of hospital care received varied in the older ages by sex and by age as well as by other population characteristics. Men aged 65 or over had higher hospital admission

rates than women, but their stays, except in the age group 70-74, were on the average shorter than those of the women. Urban residents received more days of hospital care per 100 persons than farm residents. Those in the labor force received fewer days of care than those not in the labor force.

Insured persons had higher hospital admission rates than noninsured persons in all the categories used to classify the population aged 65 and over, but in most instances insured persons had shorter hospital stays than the noninsured so that their days of hospital care per 100 persons were lower than the comparable figures for the groups with no insurance.

The survey provided data that tend to confirm as still valid the assumption that older people receive and presumably need more hospital care than younger persons. Measured in terms of days of hospital care in general and special hospitals, persons aged 65 and over, including decedents, received about 205 days of care per 100 persons in 1951, while the general population (including the aged) received about 113. If admitted to a hospital, the aged persons remained 22 days on the average; the average length of stay for the general population was 10.1 days. Admissions per 100 persons were, how-

ever, lower for the aged population (9.3) than for the general population (11.2).⁶

The following comparison between persons aged 65 and over as reported in the present survey and those reported in the two previous national surveys indicates trends over the past 15-20 years.

Year and survey	Admissions per 100 persons	Hospital days per admission	Hospital days per 100 persons
1928-31, Committee on the Costs of Medical Care ¹	6.1	24.6	150
1935-36, National Health Survey ²	5.0	29.0	146
1951, present survey.....	9.3	22.0	205

¹ Selwyn D. Collins, "Frequency and Volume of Hospital Care for Specific Diseases in Relation to All Illnesses Among 9,000 Families, Based on Nationwide Periodic Canvasses, 1928-31," *Public Health Reports*, Sept. 23, 1942, p. 1207. (Combination of data in table 1 for surgical and nonsurgical cases.)

² G. St. J. Ferrott, Marcus S. Goldstein, and Selwyn D. Collins, *Illness and Health Services in an Aging Population: Health Status and Health Requirements of an Aging Population*, Federal Security Agency, Public Health Service Publication No. 176, 1952, table 4, page 10.

In the interval there has been an increase of about 50 percent in the admission rate, and though the average length of stay declined somewhat, the amount of hospital care increased about one third.

Despite recognized increases in hospital utilization in the recent past, there is a common assumption that older persons are not getting the amount of hospital care they need. It is difficult to test this factually, because "need" is hard to define or to measure. Some inferences, though no clear-cut confirmation, can be drawn from the survey data, which tend to indicate the validity of this assumption. For example, insured persons appear to have been better-than-average risks in the aged population. The durations of their hospital stays were shorter than those of the noninsured, they required fewer days per 100 persons than the noninsured, and yet their admission rates were higher. This was equally true whether or not these persons were in the labor force. If it is inferred that the insured per-

⁶ Rates for the general population based on "Hospital Service in the United States," *Journal of the American Medical Association*, May 10, 1952, table G, p. 151.

⁵ Health Insurance Council, *Annual Survey: Accident and Health Coverage in the United States as of December 31, 1951*, New York, June 1952.

sons entered hospitals more freely because the financial barrier was lowered or removed, their admission rates may approximate their real need. If their rates are not exaggerated by overhospitalization, it follows that some of the noninsured, deterred by higher economic barriers, went without needed care, since the admission rate of the whole noninsured group was only about 60 percent that of the insured. Other indirect evidence of the same nature is found in the fact that certain groups received less care than would be indicated by comparison with other groups. The nonwhite and farm groups were in this category.

The low admission rates of the noninsured farm residents suggest a correlation between unavailability of facilities, or distance from facilities, and admission to the hospital. That this can be only a partial explanation, however, of the low utilization rates of this group as measured in hospital days received is evident from the relatively high admission rates for the insured farm population. A somewhat similar indication of financial barriers to needed care is seen from comparisons of the insured and noninsured by race. In this instance it is possible that the insured nonwhite persons who had relatively high hospital utilization rates may have been in the main urban dwellers with relatively easy access to hospitals and that the noninsured may have been largely rural residents. A possible lack of facilities for care of the chronically ill is not germane to these points as an explanation for failure to get needed care, since care in special institutions for the chronic sick, in nursing homes, or similar places was not included in the data.

The analysis of methods of meeting hospital bills points to the problems encountered by those who are hospitalized and suggests that the hospitalization insurance reported among persons aged 65 and over varies widely in the amount of protection it affords. Three-fourths of the hospitalized persons relied on a single source to meet the hospital bill, but a fourth had to use more than one. More than half of those with insur-

ance had to supplement the insurance with other means. Among the insured, 46 percent of the men but only 18 percent of the women had insurance whose benefit provisions were sufficient to meet the entire hospital bill, suggesting wide differences in the amount of protection.

The findings suggest that various inadequacies in the insurance protection (such as limitations on dependents' benefits, limitations on the number of days of hospital care for which the insurance will pay, fixed indemnity amounts per day of care that are less than the charges made by the hospitals, and exclusion of chronic and other conditions from the terms of the insurance contract) are probably all reflected in the high percentage of insured hospitalized persons who had to supplement their insurance by using other personal resources, or receive help from relatives in meeting the hospital bills. In the absence of a cross tabulation of the individual method of paying the bill with the duration of the individual case, some of these points cannot be verified even though it is known that only a small percent of the insured hospitalized persons had stays longer than 30 days.

It is worth recalling that among those who were hospitalized, 15 percent—22 percent among the noninsured persons but less than 2 percent among the insured persons—received their hospital care without charges from the hospital. This substantial amount of "free" hospital care among older people must not, however, be interpreted as meaning that all who could not pay hospital bills received care without charge. Care with no charge to the patient, because the burden is assumed either by the hospital or by public aid or private charity, has been unevenly available in different parts of the country. It is therefore not surprising that, even apart from those whose bills were paid by themselves, by insurance, or by both, a third of the hospitalized persons had their bills paid in whole or in part by relatives or others. Indeed, 45 percent of the noninsured hospitalized persons were unable to finance their hospital care without

supplemental help from other sources.

The insured, too, for whom their insurance benefits probably met a large part of the direct payments they had to make at the time of hospitalization, had to have supplemental funds more often than not. Persons entirely without any of these sources for supplemental help with hospital bills may never have entered the hospital.

The farm families were outstanding in the extent to which they reported financing their own hospital care—70 percent paid their bills entirely by themselves or only with help from relatives. That they were able to assume responsibility for their own care in such a high proportion of cases may have been due to the relatively low cost of their periods of hospitalization, since their admissions were fewer and their durations shorter than those of other groups. The converse may, however, be true—that hospital admission rates were low and hospital stays were short among farm families because they could not afford a greater frequency and a larger amount of care, that "free" care was less available, and that many could not afford hospital care at all and did not receive it. Wider ownership of insurance with more comprehensive benefits, or broader public provisions, or both, would probably alter the picture.

As noted earlier, the survey shows that the ownership of hospitalization insurance is more extensive among those aged 65 and over than had been indicated by previously available data. But this finding should not obscure the fact that insurance still extends to only one-fourth of this population. Much wider and more comprehensive protection against hospital costs is needed, whether achieved through private or public insurance, tax-supported services, or both. The meager financial resources of large proportions of the older population suggest that, if the need is to be met through insurance, its ownership after age 65 should not be dependent on employment status or on ability to pay uniform (or perhaps any) premiums after retirement from the labor force.

Notes and Brief Reports

Federal Credit Unions, 1951

Provision of convenient credit union facilities is an essential part of the effort to promote habits of thrift

—one of the major purposes for which the Federal credit union system was established. Each charter is issued to a group of persons with interests in common and defines in

specific terms the group that it may serve. The facilities are organized to meet their convenience and accordingly are set up where the members live, work, or attend church or meetings of their labor unions, lodges, or farm organizations.

The success of this policy is evi-

Number of operating Federal credit unions and number of members, by type of membership, December 31, 1950 and 1951

Type of membership	Number of Federal credit unions		Members						Average shares per member		
	Dec. 31, 1951	Dec. 31, 1950	Potential number, Dec. 31, 1951	Actual number		Average per credit union		Ratio of actual to potential membership		Dec. 31, 1951	Dec. 31, 1950
				Dec. 31, 1951	Dec. 31, 1950	Dec. 31, 1951	Dec. 31, 1950	Dec. 31, 1951	Dec. 31, 1950		
All credit unions.....	5,398	4,984	6,091,569	2,463,898	2,126,823	456	427	40.4	39.3	\$185	\$170
Associational groups, total.....	770	713	1,047,499	202,831	179,602	263	252	19.4	18.6	161	147
Cooperatives.....	165	161	295,207	37,122	33,510	225	208	12.6	11.3	177	163
Fraternal and professional.....	189	175	143,802	44,371	38,785	235	222	30.9	29.8	217	202
Religious.....	268	239	357,121	73,702	63,436	275	265	20.6	21.6	138	126
Labor unions.....	148	138	251,369	47,636	43,871	322	318	19.0	17.9	132	113
Occupational groups, total.....	4,509	4,162	4,886,881	2,234,929	1,925,366	496	463	45.7	44.6	188	173
Amusements.....	10	10	6,740	4,969	4,795	497	480	73.7	67.8	403	360
Automotive products.....	178	149	506,497	128,111	105,137	720	706	25.3	21.9	146	129
Banking and insurance.....	67	56	33,075	18,691	16,746	279	299	56.5	57.9	212	188
Beverages.....	33	31	21,159	12,003	10,735	364	346	56.7	50.1	179	154
Chemicals and explosives.....	118	107	104,816	63,389	52,240	537	488	60.5	55.2	196	176
Construction and materials:											
Lumber.....	31	28	17,346	10,107	9,343	326	334	58.3	57.0	173	153
Other.....	57	54	42,031	23,485	21,052	412	390	55.9	50.5	188	170
Educational:											
Colleges.....	49	46	37,883	13,620	11,577	278	252	36.0	35.4	141	128
Schools.....	251	238	164,970	70,894	63,585	282	267	43.0	42.0	201	179
Electric products.....	151	145	247,087	114,298	96,109	757	663	46.3	43.8	187	170
Food products:											
Bakery, grocery, and produce.....	75	71	37,751	22,840	21,364	305	301	60.5	62.1	196	181
Dairy.....	67	64	27,559	19,343	18,163	289	284	70.2	68.1	221	192
Meat packing.....	40	38	14,939	9,854	9,132	246	240	66.0	66.3	219	200
Other.....	99	95	67,652	39,769	36,342	402	383	58.8	56.8	303	286
Furniture.....	30	30	9,935	6,505	6,439	217	215	65.5	63.3	192	182
Glass.....	56	52	67,400	40,875	37,333	730	718	60.6	56.9	196	181
Government:											
Federal.....	564	517	815,729	310,016	254,638	550	493	38.0	37.9	143	131
Local.....	228	206	225,488	116,349	101,953	510	495	51.6	51.4	229	218
State.....	71	63	55,232	24,005	21,380	338	339	43.5	43.5	158	158
Hardware.....	62	57	39,796	24,845	22,249	401	390	62.4	59.2	211	191
Hotels and restaurants.....	27	25	14,585	6,721	6,580	249	263	46.1	46.4	129	123
Laundries and cleaners.....	24	21	5,728	3,216	2,994	134	143	56.1	55.3	100	103
Leather.....	22	19	8,249	4,373	3,402	199	179	53.0	48.9	144	132
Machine manufacturers.....	172	162	214,283	106,576	82,787	620	511	49.7	45.7	217	189
Metals:											
Aluminum.....	25	24	22,717	9,298	9,465	372	394	40.9	42.8	135	116
Iron and steel.....	190	170	357,221	124,544	106,508	655	627	36.9	36.3	190	171
Other.....	104	97	79,564	47,088	41,904	433	432	59.2	53.4	206	183
Paper.....	87	84	70,326	44,336	38,764	510	461	63.0	61.2	184	177
Petroleum.....	274	262	221,081	143,393	130,504	523	498	64.9	63.1	247	233
Printing and publishing:											
Newspapers.....	63	62	32,060	20,566	19,285	326	311	64.1	61.1	230	216
Other.....	44	42	17,997	11,321	11,508	257	274	62.9	57.2	194	169
Public utilities:											
Heat, light, and power.....	137	130	79,301	54,590	50,170	368	386	68.8	69.7	182	171
Telegraph.....	10	10	3,844	2,751	2,690	275	269	71.6	69.9	207	185
Telephone.....	105	95	154,236	79,086	70,012	753	737	51.3	49.3	177	162
Rubber.....	36	24	69,043	15,793	12,015	439	501	22.9	22.0	145	130
Stores.....	209	188	187,883	95,639	84,076	458	447	50.9	50.9	176	171
Textiles.....	106	97	90,972	48,315	43,283	456	446	53.1	47.3	156	157
Tobacco products.....	3	3	2,800	1,921	1,598	640	533	68.6	57.1	91	82
Transportation:											
Aviation.....	31	29	235,323	82,788	60,178	2,671	2,075	35.2	38.5	231	205
Bus and truck.....	76	66	40,042	23,178	18,265	305	277	57.9	51.0	169	162
Railroads.....	231	221	245,179	122,804	110,302	532	499	50.1	50.0	171	152
Other.....	82	77	61,892	37,885	37,836	462	491	61.2	61.5	188	171
Miscellaneous.....	214	197	149,440	74,779	60,928	349	309	50.0	49.7	175	158
Residential groups, total.....	119	109	157,189	26,138	21,855	220	201	16.6	16.9	152	132
Rural community.....	84	75	94,426	18,170	14,900	216	199	19.2	19.9	167	142
Urban community.....	35	34	62,763	7,968	6,955	228	205	12.7	12.8	118	112

dent from the fact that, at the end of 1951, more Federal credit unions were serving more persons than ever before. Assets, the amount of shareholdings of members, and the amount outstanding in loans were also at all-time highs.

Detailed information on the Federal credit unions operating in 1951 and 1950, grouped by type of membership, is shown in the accompanying table. Federal Government employees had the largest number (564) of operating Federal credit unions. The group of 274 credit unions serving petroleum industry employees was second in size, and those for religious groups, numbering 268, were third.

Federal credit unions serving Federal Government employees also had the greatest net gain (47) in number during the year. Religious groups and automotive industry employee groups also had substantial increases, with 29 each.

An outstanding development during the year was the chartering and organization of 18 Federal credit unions to serve the employees of a large chain of stores. As of December 31, 1951, these 18 credit unions had total assets of more than \$1 million and were serving 11,400 members.

The largest membership of any group of Federal credit unions was in those serving Federal Government employees. Their members numbered 310,016; the increase of 55,378 was the largest for any group. Credit unions serving employees of the petroleum industry had the second largest membership (143,393); automotive products employee groups were third (128,111). The increase of 23,789 in the membership of credit unions serving the machine manufacturing industry was second only to that in the Federal Government employee groups and brought the total to 106,576.

Estimated number of employers¹ and workers and estimated amount of wages in covered employment under old-age and survivors insurance, by specified period, 1940-51²

[Corrected to Oct. 1, 1952]

Year and quarter	Employers reporting wages ³ (in thousands)	Workers with taxable wages during period ⁴ (in thousands)	Taxable wages ⁵		All workers in covered employment during period ⁴ (in thousands)	Total payrolls in covered employment ⁶	
			Total (in millions)	Average per worker		Total (in millions)	Average per worker
1940.....	2,500	35,393	\$32,974	\$932	35,393	\$35,668	\$1,008
1941.....	2,646	40,976	41,848	1,021	40,976	45,463	1,110
1942.....	2,655	46,363	52,939	1,142	46,363	58,219	1,256
1943.....	2,394	47,656	62,423	1,310	47,656	69,653	1,462
1944.....	2,469	46,296	64,426	1,392	46,296	73,349	1,584
1945.....	2,614	46,392	62,945	1,357	46,392	71,560	1,543
1946.....	3,017	48,845	69,088	1,414	48,845	79,290	1,623
1947.....	3,246	48,908	78,372	1,602	48,908	92,449	1,890
1948.....	3,298	49,018	84,122	1,716	49,018	102,255	2,086
1949.....	3,316	46,796	81,808	1,748	46,796	99,989	2,137
1950 ⁷	3,340	48,100	87,498	1,819	48,100	109,804	2,283
1951 ⁸	4,200	56,000	110,900	1,980	56,000	133,500	2,389
1943							
January-March.....	1,971	36,537	15,462	423	36,537	15,760	431
April-June.....	2,008	37,483	16,561	442	37,557	17,400	463
July-September.....	1,998	37,682	15,838	420	38,057	17,498	460
October-December.....	2,001	36,016	14,562	404	37,593	18,905	505
1944							
January-March.....	2,010	36,326	17,362	478	36,326	17,690	487
April-June.....	2,048	36,893	17,284	468	36,992	18,185	492
July-September.....	2,038	37,301	16,243	435	37,752	18,359	496
October-December.....	2,039	35,629	13,537	380	37,789	19,109	506
1945							
January-March.....	2,076	35,855	17,874	499	35,855	18,262	509
April-June.....	2,149	35,854	17,541	489	35,949	18,558	516
July-September.....	2,176	35,684	14,982	420	36,285	17,261	476
October-December.....	2,199	33,598	12,548	373	35,973	17,478	486
1946							
January-March.....	2,287	36,038	16,840	467	36,038	17,397	483
April-June.....	2,416	38,055	17,845	469	38,153	19,079	500
July-September.....	2,478	39,670	17,709	446	40,228	20,222	508
October-December.....	2,513	37,945	16,694	440	39,830	22,562	565
1947							
January-March.....	2,509	38,765	20,805	537	38,765	21,497	555
April-June.....	2,587	39,801	20,655	519	40,175	22,245	554
July-September.....	2,617	40,255	19,555	486	41,155	23,035	560
October-December.....	2,609	37,448	17,357	463	40,748	25,672	630
1948							
January-March.....	2,588	39,560	23,080	583	39,560	23,923	605
April-June.....	2,690	40,245	22,708	564	40,524	24,668	609
July-September.....	2,699	40,585	21,150	521	41,675	25,700	617
October-December.....	2,661	36,790	17,184	467	41,540	27,964	673
1949							
January-March.....	2,639	38,200	23,376	612	38,200	24,254	635
April-June.....	2,693	38,970	22,571	579	39,250	24,570	626
July-September.....	2,697	38,805	20,160	520	39,820	24,971	627
October-December.....	2,692	35,400	15,701	444	39,160	26,194	669
1950							
January-March.....	2,671	37,400	23,490	628	37,400	24,316	650
April-June.....	2,766	39,500	24,052	609	39,800	26,210	659
July-September.....	2,768	40,700	22,382	550	41,900	28,165	672
October-December.....	2,741	37,300	17,574	471	41,600	31,113	748
1951							
January-March.....	3,520	45,000	30,200	671	45,000	30,900	687
April-June.....	3,600	46,000	30,600	665	46,300	32,900	711
July-September.....	3,590	46,000	27,500	598	47,300	34,000	719
October-December.....	3,600	43,000	22,600	526	47,500	36,000	758

¹ Number corresponds to number of employer returns. A return may relate to more than 1 establishment if employer operates several separate establishments but reports for concern as a whole.

² Data exclude joint coverage under the railroad retirement and old-age and survivors insurance programs.

³ Quarterly and annual data for 1937-39 were presented in the *Bulletin* for February 1947, p. 31; quarterly data for 1940 were in the *Bulletin* for August

1947, p. 30; quarterly data for 1941 and 1942 were in the *Bulletin* for February 1948, p. 31.

⁴ A description of these series and quarterly data for 1940 were presented in the *Bulletin* for August 1947, p. 30; quarterly data for 1941 and 1942 were in the *Bulletin* for February 1948, p. 31.

⁵ Preliminary.

⁶ Preliminary; includes data for new coverage under the 1950 amendments, except for newly covered self-employed persons and their earnings.

Employers, Workers, and Wages, Fourth Quarter 1951

During October-December 1951 the number of workers (not including the newly covered self-employed)

with wages taxable under old-age and survivors insurance is estimated at 43 million, or 15.3 percent higher than in the fourth quarter of 1950. Their average taxable wages were estimated at \$526—an increase of 11.7 percent.

In the entire calendar year 1951, according to preliminary estimates, 56 million persons received taxable wages amounting to \$110.9 billion—increases of 16.4 percent and 26.7 percent, respectively, from 1950. The average taxable wage of \$1,980 was 8.9 percent more than the average a year earlier. The increases in covered employment and average taxable wages resulted from the rise to \$3,600 in the maximum taxable wage and the extension of coverage, effective January 1, 1951; to some extent they also resulted from the growth in economic activity.

From the third to the fourth quarter of 1951, on the other hand, the number of workers with taxable wages and the average taxable wage declined 6.5 percent and 12.0 percent, respectively. These declines followed the seasonal pattern observed in past years and resulted from the operation of the limitation on taxable wages.

The extension of coverage, the increase in the maximum taxable wage, and the continuing expansion of economic activity are also evident in the increases shown in the number of employees and amount of wages paid in covered employment in the fourth quarter of 1951. The number of workers in covered employment, not including the self-employed, is estimated at 47.5 million, an increase of 0.4 percent from the third quarter of 1951 and of 14.2 percent from the fourth quarter of 1950. Total payrolls in covered employment amounted to an estimated \$36 billion, an increase of 5.9 percent from the total for the preceding quarter and 15.7 percent from the corresponding quarter of 1950. Earnings of the average worker in covered employment, estimated at \$758, were 5.4 percent greater than the average for the third quarter of 1951 and 1.3 percent greater than that for the fourth quarter of 1950.

It is estimated that 3.6 million employers paid taxable wages in October–December 1951 and 4.2 mil-

lion in the calendar year 1951, increases of 31 percent and 26 percent from the number in the fourth quarter of 1950 and the calendar year 1950.

Amendments to the Civil Service Retirement Act

Only one major law dealing with the civil-service retirement system was enacted by the Eighty-second Congress in its second session (Public Law 555, signed by President Truman on July 15, 1952). A minor amendment (Public Law 548) was also adopted; it permits continued coverage of congressional employees in certain instances of death or resignation of the Member of Congress for whom they worked. No significant legislation dealing with the program was enacted during the first session of this Congress.

The primary purpose of Public Law 555 was to provide a cost-of-living increase in the annuities of persons already on the rolls. Effective September 1952, increases are made for most annuitants—not only retired employees but also survivor annuitants—whose annuities commenced on or before April 1, 1952. The amounts of the increase depend upon the beginning date of the annuity and are shown in the following table; these amounts are subject to certain maximum provisions.

Commencing date of annuity	Monthly increases
Oct. 2, 1951–Apr. 1, 1952.....	\$3
Apr. 2, 1951–Oct. 1, 1951.....	6
Oct. 2, 1950–Apr. 1, 1951.....	9
Apr. 2, 1950–Oct. 1, 1950.....	12
Oct. 2, 1949–Apr. 1, 1950.....	15
Apr. 2, 1949–Oct. 1, 1949.....	18
Oct. 2, 1948–Apr. 1, 1949.....	21
Apr. 2, 1948–Oct. 1, 1948.....	24
On or before Apr. 1, 1948.....	27

In no case is the increase to exceed 25 percent of the previous annuity, nor can the increase bring the total annuity to more than \$180 a month.

As an illustration of how the maximum provisions operate, consider the case of an individual whose annuity commenced in January 1950. If his annuity before the amendments had

been less than \$60 a month, he would receive a 25-percent increase. If he had been receiving \$60–165, the increase would be a flat \$15. His annuity would be raised by an amount sufficient to bring the total up to \$180 if he had been receiving more than \$165 but less than \$180, and he would receive no increase if the previous annuity had been \$180 or more.

The justice of the method as it relates to retired employees may readily be seen. In general, because of the rising trend in wages in the past decade, the employee who retired some years ago had, for the same job classification, a lower average salary to be used for computation of his annuity than did the employee who retired more recently.

The method of increase as it relates to survivors is less logical, since the amount given is not necessarily, as would seem to be proper, dependent on the date the employee died or retired, but rather on the date the survivor annuity began. As an example of the anomalies resulting, the situations of two employees who retired in July 1948 with identical work histories, and thus identical annuities, may be compared. Assume that one died shortly after retirement and the other died in May 1952—both leaving widows eligible for immediate annuities of, say \$100 a month. The two widows receive identical annuities up through August 1952, but thereafter one widow will receive \$24 more than the other.

The increase is payable to each survivor annuitant in the family or, in other words, not only to the widow but also to all child survivors. For survivor children where the mother is present, the provision that the increase shall not exceed 25 percent will apply in many instances, since under the basic law there is a maximum of \$30 a month for a child's annuity. If there are three or more children in the family, the maximum is even lower—\$25 a child for a 3-child family, \$19 for a 4-child family, and so on.

Still another matter of interest is the way that the benefit increases apply to individuals who have made deposits under the supplementary, voluntary annuity system set up in conjunction with the civil-service re-

retirement program and to individuals who have made optional purchases of service credit. In both instances the \$180 maximum applies, with the result that some individuals may be unfairly penalized by their previous thrift.

An employee, for example, who retired in January 1949 with a basic annuity of \$159 per month and who had made voluntary deposits sufficient to purchase an additional \$21 (or more) per month does not receive any increase under the provisions of the new legislation. If he had not made this deposit (and perhaps had saved the money through other means—buying life insurance or an annuity, for example, or Government bonds), he would have received an increase to the same \$180. A similar situation prevails in the case of an individual who made an optional deposit to purchase service credit for which he had not contributed currently; under certain circumstances his annuity would be the same as if he had not made the deposit.

These increases are not a permanent part of the system. They will cease to be effective if the consumers' price index of the Bureau of Labor Statistics is less than 169.9 (the level for April 1948) for three consecutive months. It seems rather unlikely that the increase will be terminated for this reason in the near future, since in July 1952 the index was 190.8. In any event, the increase will not extend beyond June

1955, and it will be in effect until then only if a congressional appropriation is made for the additional cost of the increases for the fiscal years 1953-54 and 1954-55. If such appropriation is not made, the increases will be effective only through June 1954.

The cost of the annuity increases is to be borne by the civil-service retirement and disability fund for at least the period September 1952-June 1953. The provision would seem to mean that eventually congressional appropriations will have to be made that will meet the increased cost. If Congress does not make an appropriation for the increased cost for the fiscal years 1954 and 1955, then the fund will have to bear the additional cost for July 1953 to June 1954. In that event, increased cost to the Government will also be involved. The preceding discussion assumes that the increases will not be withdrawn because of the provision relating to a substantial fall in the price level.

The legislation also permits an annuitant to waive his rights to any portion of his annuity—either the basic annuity or the increase granted by the new law—for any length of time he wishes. The provision prevents some inequitable situations in connection with certain types of pensions from the Veterans Administration, which are subject to a means test on an "all or none" basis. The civil-service annuity or the increase

might push a veteran's income over the maximum and result in complete forfeiture of his pension. For example, veterans are denied non-service-connected pensions if their income exceeds \$1,400 a year for single men and \$2,700 for married men. A single veteran who receives a civil-service annuity of \$1,300 a year could receive his full veteran's pension, but he would forfeit the entire amount if his annuity were increased by \$9 a month. This provision was introduced so that he could waive enough of his civil-service annuity to permit receipt of the full pension from the Veterans Administration.

The new legislation further provides for the creation of a Committee on Retirement Policy for Federal Personnel, consisting of a chairman appointed by the President, and the Secretary of the Treasury, the Secretary of Defense, the Chairman of the Board of Governors of the Federal Reserve System, the Director of the Bureau of the Budget, and the Chairman of the Civil Service Commission. This committee is to study all retirement systems for Federal personnel and make its report by the end of 1953. In particular, the study is to be focused on the current financial status of the several systems and the most desirable methods of financing them. Moreover, the relationship of these systems to one another and to the old-age and survivors insurance program are to be investigated.

Recent Publications*

Social Security Administration

BREWSTER, AGNES W. *Independent Plans Providing Medical Care and Hospitalization Insurance in 1949 in the United States: 1950 Survey.* (Division of Research and Statistics, Bureau Memorandum No. 72.) Washington: U. S. Govt. Print. Off., 1952. 122 pp. Processed.

A survey of plans in operation in 1949; gives data on enrollment, benefits, and finances. Limited free distribution; apply to the Division of Research and Statistics, Office of Commissioner, Social Security Administration, Washington 25, D. C.

WHITE, RUTH. *Medical Care in Public Assistance, 1946. Summary Report.* (Public Assistance Report No. 16.) Washington: Bureau of Public Assistance, June 1952. 127 pp. Processed.

Summarizes a 1946 study, based on detailed records kept by 20 States and information on program administration submitted by 22 additional States. Limited free distribution; apply to the Bureau of Public Assistance, Social Security Administration, Washington 25, D. C.

General

America's Manpower Crisis: The Report of the Institute of Manpower Utilization and Government Personnel, Stanford University, August 22, 23, and 24, 1951. Robert A. Walker, editor. (Publication No. 106.) Chicago: Public Administration Service, 1952. 191 pp. \$3.

ANDREWS, F. EMERSON. *Corporation Giving.* New York: Russell Sage Foundation, 1952. 361 pp. \$4.50. Includes discussion of the scope and problems of corporation giving, the beneficiaries, and legal and tax factors.

BIONDO, B. *L'Ordinamento Della Previdenza Sociale e i Progetti di Riforma.* (2d rev. edition.) Trento: Arti Grafiche Saturnia, 1950. 445 pp.

The various general compulsory Italian social insurance programs and

the special provisions for public employees and certain other special groups. Includes a general summary as well as reviews of retirement, health, accident, and unemployment insurance.

BUSTOS A., JULIO. *La Seguridad Social: La Previsión y la Medicina Social en Chile en 1950.* Santiago, Chile: Ministerio de Salubridad, Previsión y Asistencia Social, 1952. 122 pp.

Summarizes Chilean social insurance developments in general, reports on the medical services of the workers' compulsory insurance fund, and reviews the work of the main funds for salaried employees during 1950.

KATIAL, C. L. "State Insurance Scheme." *Indian Labour Gazette*, Delhi, Vol. 9, Apr. 1952, pp. 817-822.

Describes the Employees' State Insurance Scheme that was inaugurated in India in February 1952.

LARQUE, PIERRE. "International Problems of Social Security." *International Labour Review*, Geneva, Vol. 66, July 1952, pp. 1-29; Aug. 1952, pp. 113-141. 60 cents.

"Analyzes the various concepts underlying the social security laws, and considers the situation as regards conflicts of laws and equality of treatment of aliens and nationals."

LEWIS, BEN W. *British Planning and Nationalization.* New York: The Twentieth Century Fund, 1952. 313 pp. \$3.

Includes a chapter on the National Health Service.

The Manual of Corporate Giving. Beardsley Ruml, editor. Washington: National Planning Association, 1952. 415 pp. \$6.75.

Discusses policy and administration and the problems and possibilities in each field of corporate giving.

MAXWELL, JAMES A. *Federal Grants and the Business Cycle.* New York: National Bureau of Economic Research, Inc., 1952. 122 pp. \$2.

Includes an analysis of public assistance grants in relation to the business cycle that points out some of the defects in the system of categorical grants and discusses proposed changes.

MOORTHY, M. VASUDEVA. "Educational, Recreational, Health and Housing Services for the Industrial Worker and His Family." *Indian*

Journal of Social Work, Andheri, Bombay, Vol. 12, Mar. 1952, pp. 384-393. \$1.

PHELPS, HAROLD A., and HENDERSON, DAVID. *Contemporary Social Problems.* (4th ed.) New York: Prentice-Hall, Inc., 1952. 536 pp. \$5.

TAX FOUNDATION. *Trends in State Expenditures, 1940-1951: An Analysis of State Spending During and After World War II.* (Project Note No. 30.) New York: The Foundation, 1952. 30 pp.

U. S. DEPARTMENT OF LABOR. BUREAU OF LABOR STATISTICS. *Family Income, Expenditures, and Saving in 1950.* (Bulletin No. 1097.) Washington: U. S. Govt. Print. Off., July 1952. 55 pp. 30 cents.

A preliminary report summarizing the results of the Survey of Consumer Expenditures, which was made as part of the program for revision of the consumers' price index.

U. S. DISPLACED PERSONS COMMISSION. *Memo to America: The DP Story. Final Report . . .* Washington: U. S. Govt. Print. Off., 1952. 376 pp. \$1.

Describes the resettlement of more than 400,000 displaced persons in the United States.

Retirement and Old Age

DESMOND, THOMAS C. "The Plight of the Elderly." *Today's Health*, Chicago, Vol. 30, Aug. 1952, pp. 18-22. 35 cents.

FEDERAL SECURITY AGENCY. COMMITTEE ON AGING AND GERIATRICS. *Fact Book on Aging.* Washington: U. S. Govt. Print. Off., 1952. 62 pp. 30 cents.

FERDERBER, MURRAY B. "Rehabilitation of the Aging." *Minnesota Welfare*, St. Paul, Vol. 7, June 1952, pp. 10-19.

INDELMAN, ROCHELLE. "The Application of Two Basic Case Work Concepts in Work with Older Persons." *Jewish Social Welfare Quarterly*, New York, Vol. 28, June 1952, pp. 388-395. \$2.

SCHWARTZ, MEYER. "Communal Planning for the Mentally Ill in Jewish Homes for the Aged." *Jewish Social Service Quarterly*, New York, Vol. 28, June 1952, pp. 378-387. \$2.

Employment

BANTA, K. VERNON. "The Physically Handicapped as a Source of Manpower." *Employment Security Review* (Continued on page 20)

* Prepared in the Library, Federal Security Agency. Orders for the publications listed should be directed to publishers and booksellers; Federal publications for which prices are listed should be ordered from the Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C.

Current Operating Statistics

Table 1.—Selected social insurance and related programs, by specified period, 1940-52

[In thousands; data corrected to Oct. 7, 1952]

Year and month	Total	Retirement, disability, and survivor programs										Unemployment insurance programs					
		Monthly retirement and disability benefits ¹				Survivor benefits				Temporary disability benefits ²		State laws ¹⁰	Service-men's Readjustment Act ¹³	Railroad Unemployment Insurance Act ¹¹			
		Social Security Act	Railroad Retirement Act	Civil Service Commission ³	Veterans Administration ⁴	Monthly				Lump-sum ⁷							
						Social Security Act ⁵	Railroad Retirement Act ⁶	Civil Service Commission ⁸	Veterans Administration ⁹	Social Security Act	Other ⁴						
Number of beneficiaries																	
1951																	
August		2,858.1	262.9	167.6	2,378.9	1,318.4	148.1	31.6	1,016.1	36.7	11.2	28.0	30.7	801.0	1.1	24.6	
September		2,896.7	263.3	168.4	2,381.2	1,335.8	148.9	32.3	1,016.2	32.8	8.7	26.8	28.6	757.8	.8	20.7	
October		2,932.9	263.9	169.2	2,385.5	1,357.9	150.6	33.2	1,018.6	37.0	10.6	27.6	32.9	712.8	.5	21.2	
November		2,960.6	264.7	170.2	2,388.7	1,371.6	151.0	33.9	1,019.4	30.5	9.0	26.6	31.5	749.3	.7	30.9	
December		2,993.9	267.1	171.0	2,391.0	1,385.1	149.7	34.5	1,020.3	27.8	8.3	27.2	28.9	797.3	.7	31.6	
1952																	
January		3,030.6	284.0	171.7	2,392.6	1,402.7	149.7	35.4	1,028.7	39.3	8.9	27.6	38.3	1,185.2	.9	48.3	
February		3,056.2	308.1	172.5	2,393.8	1,419.6	150.5	36.2	1,031.3	38.8	8.6	28.7	28.6	1,146.4	.8	48.3	
March		3,076.9	324.4	173.3	2,398.1	1,435.2	151.4	37.2	1,029.6	40.0	11.1	33.1	28.3	1,112.8	.6	41.0	
April		3,094.4	336.2	173.9	2,403.5	1,454.2	152.3	38.2	1,036.4	40.2	13.2	32.1	27.4	992.6	.4	35.6	
May		3,104.8	343.2	174.8	2,412.2	1,469.8	153.2	39.1	1,040.4	37.7	12.2	30.2	23.8	918.4	.3	25.6	
June		3,109.5	348.9	175.6	2,418.0	1,484.3	154.2	39.8	1,042.0	35.9	11.6	32.4	24.7	918.1	.3	31.6	
July		3,120.3	352.7	176.5	2,424.4	1,488.2	154.5	40.6	1,044.2	28.4	12.1	32.6	26.9	870.9	.3	68.6	
August		(11)	354.7	178.3	2,429.3	(11)	154.6	41.3	1,047.2	31.9	11.2	30.7	33.1	979.9	.2	72.8	
Amount of benefits ¹⁴																	
1940		\$1,188,702	\$21,074	\$114,166	\$62,019	\$317,851	\$7,784	\$1,448	\$105,696	\$11,736	\$12,267			\$518,700		\$15,961	
1941		1,085,488	55,141	119,912	64,933	320,561	25,454	1,559	111,799	13,328	13,943			344,321		14,537	
1942		1,130,721	80,305	122,806	68,115	325,265	41,702	1,603	111,193	15,038	14,342			344,084		6,268	
1943		921,465	97,257	125,795	72,961	331,350	57,763	1,704	116,133	17,830	17,255	\$2,857		79,643		917	
1944		1,118,798	119,009	129,707	77,193	456,279	76,942	1,765	144,302	22,146	19,238	5,035		1,094,850	\$4,215	582	
1945		2,065,566	157,391	137,140	83,874	697,830	104,231	1,772	254,238	26,135	23,431	4,669		445,866	126,630	2,359	
1946		5,149,761	230,285	149,188	94,585	1,268,984	130,139	1,817	333,640	27,267	30,610	4,761		1,094,850	1,743,718	39,917	
1947		4,700,827	299,830	177,053	106,876	1,676,029	153,109	19,283	382,515	29,517	33,115	26,024	\$11,368	776,165	970,542	39,401	
1948		4,510,041	366,887	208,642	132,852	1,711,182	176,736	36,011	413,912	32,315	32,140	35,572	30,843	793,265	510,167	28,599	
1949		5,694,080	454,483	240,893	158,973	1,692,215	201,369	39,257	477,406	33,158	31,771	59,066	30,103	1,737,279	430,194	103,566	
1950		5,357,432	718,473	254,240	175,787	1,732,208	299,672	43,884	491,579	32,740	33,578	70,890	28,099	1,373,426	34,653	59,804	
1951		5,641,957	1,361,046	268,733	196,529	1,647,938	523,485	49,527	519,398	57,337	38,356	81,435	26,297	840,411	2,234	20,217	
1952																	
August		461,753	107,018	21,588	16,656	136,230	41,101	3,816	1,217	43,608	5,018	3,030	2,891	2,808	75,131	97	1,544
September		446,740	108,246	21,615	16,622	135,173	41,669	3,842	1,248	43,075	4,468	2,514	2,455	2,563	62,049	68	1,133
October		461,013	109,493	21,660	16,880	137,523	42,332	3,886	1,288	44,940	5,041	3,146	2,862	3,082	67,449	85	1,376
November		464,127	110,473	24,441	16,877	136,590	42,741	5,158	1,372	43,930	4,164	2,428	2,654	2,866	68,607	52	1,774
December		468,247	111,646	24,774	16,955	136,062	43,145	5,123	1,318	45,617	3,810	1,870	2,609	2,701	70,624	59	1,934
1952																	
January		522,902	113,046	25,662	17,124	137,537	43,674	5,296	1,384	45,266	5,431	2,681	2,885	3,387	116,469	84	2,976
February		511,274	114,004	26,683	17,287	136,561	44,168	5,404	1,414	44,573	5,305	2,700	2,792	2,447	105,023	66	2,847
March		512,830	114,703	27,400	17,380	137,533	44,628	5,524	1,461	45,519	5,456	3,132	3,283	2,602	101,564	56	2,589
April		507,643	115,262	27,875	17,533	138,037	45,184	5,571	1,501	45,281	5,431	3,576	3,373	2,432	94,385	45	2,157
May		500,390	115,582	28,102	17,662	138,250	45,647	5,669	1,525	45,708	5,122	3,118	3,182	2,204	86,958	33	1,628
June		497,420	115,666	28,478	17,723	136,055	46,073	5,727	1,550	46,985	4,898	3,048	3,291	2,218	83,511	29	2,168
July		520,521	116,124	28,698	17,922	147,536	46,173	5,747	1,591	48,267	3,893	3,606	3,531	2,667	88,612	26	6,128
August		537,321	(11)	28,807	18,215	148,319	(11)	5,765	1,627	49,929	4,703	2,814	3,160	4,316	95,389	14	7,865

¹ Under the Social Security Act, retirement benefits—old-age, wife's, and husband's benefits, and benefits to children of old-age beneficiaries—partly estimated. Under the other 3 systems, benefits for age and disability; beginning December 1951, spouse's annuities under the Railroad Retirement Act.

² Data for civil-service retirement and disability fund; excludes noncontributory payments made under the Panama Canal Construction Annuity Act to persons who worked on Canal construction 1904-14 or to their widows. Through June 1948, retirement and disability benefits include payments to survivors under joint and survivor elections; beginning July 1948, payments under survivor provisions shown as survivor benefits.

³ Pensions and compensation, and subsistence payments to disabled veterans undergoing training.

⁴ Mother's, widow's, widower's, parent's, and child's benefits. Partly estimated.

⁵ Annuities to widows under joint and survivor elections; 12-month death-benefit annuities to widows and next of kin; and, beginning February 1947, widow's, widow's current, parent's, and child's benefits.

⁶ Payments to widows, parents, and children of deceased veterans.

⁷ Number of decedents on whose account lump-sum payments were made.

⁸ Payments under the Railroad Retirement Act and Federal civil-service and veterans' programs.

⁹ First payable in Rhode Island, April 1943; in California, December 1946; in

New Jersey, January 1949; in New York, July 1950 (data not available); and under the railroad program, July 1947. Excludes hospital benefits in California; also excludes private plans in California and New Jersey except for calendar-year totals.

¹⁰ Represents average weekly number of beneficiaries.

¹¹ Represents average number of beneficiaries in a 14-day registration period.

¹² Readjustment allowances to unemployed veterans and to self-employed veterans. Number represents average weekly number of continued claims for the unemployed and of claims paid during the month for the self-employed.

¹³ Data by type of benefit not available; amount paid for all types of benefits (\$166,400,000, partly estimated) included in total.

¹⁴ Payments: amounts certified, under the Social Security Act (except monthly data for monthly benefits, which represent benefits in current-payment status), the Railroad Retirement Act, and the Railroad Unemployment Insurance Act; disbursements, for Veterans Administration programs except the readjustment allowance program; checks issued, under the State unemployment insurance and temporary disability laws and under the Servicemen's Readjustment Act; for civil-service programs, disbursements through June 1949 and authorizations beginning July 1949. Adjusted on annual basis except for Civil Service Commission data, which are adjusted monthly.

Source: Based on reports of administrative agencies.

Table 2.—Contributions and taxes collected under selected social insurance and related programs, by specified period, 1950-52

[In thousands]

Period	Retirement, disability, and survivors insurance			Unemployment insurance		
	Federal insurance contributions ¹	Federal civil-service contributions ²	Taxes on carriers and their employees	State unemployment contributions ³	Federal unemployment taxes ⁴	Railroad unemployment insurance contributions ⁵
Fiscal year:						
1950-51.....	\$3,120,404	\$684,343	\$577,509	\$1,364,590	\$233,537	\$24,681
1951-52.....	3,594,248	722,850	734,990	1,431,997	258,945	25,734
2 months ended:						
August 1950.....	517,186	63,723	11,366	326,324	15,255	349
August 1951.....	690,783	59,398	66,643	432,157	16,322	574
August 1952.....	622,249	395,876	105,632	382,994	22,029	223
1951						
August.....	516,259	29,694	66,022	273,692	14,641	526
September.....	239,448	* 342,357	190,087	8,075	1,004	4,060
October.....	33,105	38,313	11,201	113,755	3,018	1,884
November.....	401,037	34,006	91,342	216,650	14,124	179
December.....	269,507	37,183	54,915	7,551	764	6,318
1952						
January.....	147,890	40,466	12,264	85,085	14,069	25
February.....	448,393	33,188	92,932	161,653	164,781	518
March.....	463,297	34,407	53,934	7,767	25,350	5,749
April.....	252,135	35,724	13,902	140,916	2,918	153
May.....	485,964	31,887	89,798	251,306	15,571	352
June.....	142,689	35,922	57,973	7,083	1,024	5,889
July.....	183,710	* 362,539	16,470	140,718	5,257	10
August.....	438,536	33,338	89,162	242,276	16,772	214

¹ Represents contributions of employees and employers in employments covered by old-age and survivors insurance; from May 1951, includes deposits made in the trust fund by States under voluntary coverage agreements; beginning January 1951, on an estimated basis.

² Represents employee and Government contributions to the civil-service retirement and disability fund; Government contributions are made in 1 month for the entire fiscal year.

³ Represents deposits in State clearing accounts of contributions plus penalties

and interest collected from employers and, in 2 States, contributions from employees; excludes contributions collected for deposit in State sickness insurance funds. Data reported by State agencies; corrected to Sept. 24, 1952.

⁴ Represents taxes paid by employers under the Federal Unemployment Tax Act.

⁵ Beginning 1947, also covers temporary disability insurance.

* Includes contributions from the Federal Government.

Source: *Daily Statement of the U. S. Treasury*, unless otherwise noted.

RECENT PUBLICATIONS

(Continued from page 18)

view, Washington, Vol. 19, July 1952, pp. 26-28. 20 cents.

DAVID, PRESTON, and BAXT, ROLAND. "Techniques in the Placement of Older Workers." *Jewish Social Service Quarterly*, New York, Vol. 28, June 1952, pp. 410-414. \$2.

HANSON, STANWOOD L. "Disabled Men Work Again." *American Journal of Public Health and the Nation's Health*, New York, Vol. 42, July 1952, pp. 787-790. \$1.

Describes the operation of the rehabilitation centers of the Liberty Mutual Insurance Company in Boston and Chicago.

JOSHI, S. C. "Minimum Wages and Social Security for Industrial Workers." *Indian Journal of Social Work*, Andheri, Bombay, Vol. 12, Mar. 1952, pp. 397-401. \$1.

RAVIN, LOUIS H. "Problems of Counseling and Placement of Older Workers." *Jewish Social Service Quarterly*, New York, Vol. 28, June 1952, pp. 415-422. \$2.

SWITZER, MARY E. "New Trends in

Vocational Rehabilitation." *American Journal of Public Health and the Nation's Health*, New York, Vol. 42, July 1952, pp. 784-786. \$1.

TUCKMAN, JACOB, and LORGE, IRVING. "Attitudes Toward Older Workers." *Journal of Applied Psychology*, Washington, Vol. 36, June 1952, pp. 149-153. \$1.25.

U. S. DEPARTMENT OF LABOR. BUREAU OF EMPLOYMENT SECURITY. *Comparison of State Unemployment Insurance Laws as of December 1951*. Washington: U. S. Govt. Print. Off., 1952. 123 pp. 35 cents.

Includes a chapter on the four State programs of temporary disability insurance.

Maternal and Child Welfare

CARROLL-ABBING, JOHN PATRICK. *A Chance to Live: The Story of the Lost Children of the War*. New York: Longmans, Green and Co., 1952. 216 pp. \$3.

Tells the story of the Boys' Republic in Italy after World War II.

FREEMAN, LUCY. *Children Who Never Had a Chance*. (Public Affairs

Pamphlet No. 183.) New York: Public Affairs Committee, Inc., 1952. 24 pp. 25 cents.

How needy children are helped through the program of aid to dependent children.

HALLINAN, HELEN W. "Adoption for Older Children." *Social Casework*, New York, Vol. 33, July 1952, pp. 277-282. 50 cents.

Discusses selection of adoptive parents and techniques used in the process of placing the older child.

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NEW YORK ACADEMY OF MEDICINE. COMMITTEE ON PUBLIC HEALTH RELATIONS...SUBCOMMITTEE OF NEO-

(Continued on page 24)

Table 3.—Status of the old-age and survivors insurance trust fund, by specified period, 1937-52

[In thousands]

Period	Receipts		Expenditures		Assets			
	Appropriations, transfers, and deposits ¹	Interest received	Benefit payments	Administrative expenses	Net total of U. S. Government securities acquired ²	Cash with disbursing officer at end of period	Credit of fund account at end of period	Total assets at end of period
Cumulative, January 1937-August 1952.....	\$22,484,168	\$2,138,185	\$7,188,400	\$560,322	\$16,374,051	\$259,160	\$240,440	\$16,873,631
Fiscal year:								
1950-51.....	3,124,098	287,392	1,498,088	70,447	1,677,976	200,456	212,311	14,735,567
1951-52.....	3,598,006	333,614	1,982,377	84,673	1,950,252	214,883	112,102	16,600,036
2 months ended:								
August 1950.....	517,186	-----	128,786	10,731	277,000	148,162	200,296	13,270,281
August 1951.....	690,783	-----	339,431	15,066	350,000	178,578	220,475	15,071,852
August 1952.....	622,253	-----	332,378	16,280	101,000	259,140	240,440	16,873,631
1951								
August.....	516,259	-----	180,301	6,305	220,000	178,578	220,475	15,071,852
September.....	263,182	10,871	142,442	7,121	119,918	214,122	189,503	15,190,341
October.....	33,105	14,818	146,188	6,675	49,941	226,250	22,493	15,091,401
November.....	401,048	-----	178,659	7,294	45,200	209,231	209,407	15,306,497
December.....	269,509	131,772	161,700	6,343	129,467	222,654	299,755	15,539,734
1952								
January.....	147,892	4,508	165,212	5,626	198,700	218,897	83,371	15,518,294
February.....	448,395	-----	167,275	6,681	60,000	216,021	300,686	15,792,732
March.....	463,306	10,871	169,708	5,841	224,215	226,067	364,054	16,090,864
April.....	232,130	14,818	171,408	7,094	288,741	219,487	170,339	16,178,810
May.....	485,966	-----	168,355	6,415	225,000	215,580	259,441	16,489,005
June.....	142,691	145,860	171,005	6,516	259,067	214,883	112,102	16,600,036
July.....	183,712	-----	168,629	9,702	-----	224,617	106,849	16,604,517
August.....	438,541	-----	162,849	6,578	101,000	259,140	240,440	16,873,631

¹ For July 1940 to December 1950, equals taxes collected under the Federal Insurance Contributions Act. Beginning January 1951, amounts appropriated in accordance with sec. 201(a) of the Social Security Act as amended in 1950; from May 1951, includes deposits by States under voluntary coverage agreements. Beginning in the fiscal year 1947, includes amounts appropriated to meet costs of benefits payable to survivors of certain World War II veterans under the Social Security Act Amendments of 1946. Beginning November 1951 also includes small

amounts in reimbursement of sales of supplies and services.

² Includes accrued interest and repayments on account of accrued interest on bonds at time of purchase.

³ Appropriations suspended from Oct. 10 to Nov. 6 to adjust for estimates on which earlier 1951 appropriations were based.

Source: Daily Statement of the U. S. Treasury.

Table 4.—Status of the unemployment trust fund, by specified period, 1936-52

[In thousands]

Period	Total assets at end of period	Net total of U. S. Government securities acquired ¹	Unexpended balance at end of period	State accounts				Railroad unemployment insurance account ⁴			
				Deposits	Interest credited	Withdrawals ²	Balance at end of period	Deposits	Interest credited	Benefit payments	Balance at end of period ³
Cumulative, January 1936-August 1952.....	\$8,849,394	\$8,826,082	\$23,313	\$16,825,694	\$1,800,561	\$10,218,802	\$8,109,453	\$917,162	\$152,352	\$514,750	\$739,941
Fiscal year:											
1950-51.....	8,079,232	649,933	15,035	1,362,629	147,662	848,270	7,313,592	14,884	16,465	52,034	765,640
1951-52.....	8,673,936	582,885	26,855	1,438,987	167,441	1,000,278	7,919,742	15,442	17,064	48,312	754,195
2 months ended:											
August 1950.....	7,578,176	147,000	16,913	322,668	42	173,295	6,800,986	284	5	9,424	777,190
August 1951.....	8,367,086	271,000	31,889	428,507	17	139,275	7,602,841	345	2	6,113	764,245
August 1952.....	8,849,394	179,000	23,313	378,379	31	188,698	8,109,453	136	3	19,257	739,941
1951											
August.....	8,367,086	306,000	31,889	375,214	-----	72,760	7,602,841	316	-----	3,898	764,245
September.....	8,322,164	—25,008	11,975	15,094	3,627	62,870	7,558,691	2,457	385	3,614	763,473
October.....	8,297,804	—45,008	32,683	42,234	4,454	68,552	7,530,827	1,130	457	4,022	761,037
November.....	8,509,399	227,000	17,188	280,564	-----	64,972	7,752,430	107	-----	4,195	766,949
December.....	8,526,425	—65,020	96,263	13,917	70,611	74,365	7,762,582	3,791	7,220	4,137	763,843
1952											
January.....	8,444,406	—4,000	21,244	32,818	3,194	112,605	7,655,988	15	317	5,758	758,417
February.....	8,544,993	101,000	20,831	208,901	47	103,692	7,791,244	311	5	4,984	753,749
March.....	8,462,756	—90,008	28,602	16,134	3,910	101,591	7,709,697	3,449	368	4,527	753,059
April.....	8,410,710	—41,008	17,564	45,213	4,492	98,286	7,661,115	92	446	4,002	749,595
May.....	8,663,592	253,000	17,446	345,160	39	89,158	7,917,157	211	4	3,375	746,435
June.....	8,673,936	936	26,855	10,446	77,051	84,912	7,919,742	3,533	7,811	3,584	754,195
July.....	8,637,162	—35,000	25,080	50,331	31	84,776	7,885,328	6	3	7,234	751,834
August.....	8,849,394	214,000	23,313	328,047	-----	103,922	8,109,453	129	-----	12,022	739,941

¹ Includes accrued interest and repayments on account of interest on bonds at time of purchase; minus figures represent primarily net total of securities redeemed.

² Includes transfers from State accounts to railroad unemployment insurance account amounting to \$107,161,000.

³ Includes withdrawals of \$79,169,000 for disability insurance benefits.

⁴ Beginning July 1947, includes temporary disability program.

⁵ Includes transfers to the account from railroad unemployment insurance administration fund amounting to \$85,290,000 and transfers of \$12,338,000 out of the account to adjust funds available for administrative expenses on account of retroactive credits taken by contributors under the Railroad Unemployment Insurance Act Amendments of 1948.

Source: Daily Statement of the U. S. Treasury.

Table 5.—Old-age and survivors insurance: Monthly benefits in current-payment status¹ at the end of the month by type of benefit and by month, August 1951–August 1952

[Amounts in thousands; data corrected to Oct. 1, 1952]

Item	Total		Old-age		Wife's or husband's		Child's		Widow's or widower's		Mother's		Parent's	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Monthly benefits in current-payment status at end of month:														
1951														
August.....	4,176,535	\$148,118.8	2,176,036	\$92,025.0	618,128	\$14,108.4	804,807	\$21,632.4	361,970	\$13,071.2	197,712	\$6,625.3	17,882	\$656.5
September.....	4,232,453	149,914.8	2,204,016	93,072.6	625,736	14,259.9	816,746	21,948.3	367,728	13,270.4	199,835	6,688.2	18,392	675.3
October.....	4,290,791	151,825.5	2,231,141	94,132.8	634,319	14,442.7	830,587	22,329.6	374,460	13,505.0	201,437	6,723.7	18,847	691.6
November.....	4,332,176	153,214.3	2,252,293	94,977.1	640,241	14,573.3	838,801	22,545.4	379,291	13,674.2	202,415	6,741.9	19,135	702.3
December.....	4,378,985	154,791.1	2,278,470	96,008.3	646,890	14,709.5	846,247	22,739.2	384,265	13,849.1	203,782	6,775.8	19,331	709.1
1952														
January.....	4,433,279	156,720.9	2,306,984	97,231.4	654,335	14,878.8	855,931	22,984.6	390,731	14,076.5	205,739	6,831.9	19,559	717.7
February.....	4,475,765	158,172.1	2,328,336	98,103.7	658,921	14,979.6	864,477	23,198.4	397,107	14,299.5	207,167	6,866.3	19,757	724.6
March.....	4,512,138	159,331.8	2,344,684	98,710.1	662,799	15,060.8	873,117	23,422.1	403,210	14,514.8	208,365	6,892.2	19,963	731.8
April.....	4,548,652	160,445.4	2,359,213	99,216.6	665,482	15,111.4	883,331	23,677.7	409,732	14,744.8	210,694	6,955.8	20,180	739.1
May.....	4,574,664	161,229.1	2,367,710	99,502.9	667,450	15,153.5	890,935	23,868.5	415,790	14,954.3	212,379	7,003.1	20,400	746.8
June.....	4,593,801	161,739.4	2,372,308	99,591.5	668,297	15,169.6	896,820	24,008.9	421,730	15,161.8	214,030	7,053.2	20,616	754.5
July.....	4,608,494	162,296.8	2,381,641	100,002.1	670,772	15,235.4	895,775	23,955.5	425,253	15,282.2	214,335	7,063.6	20,718	757.9
August ²	4,679,986	166,460.0	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

¹ Benefit in current-payment status is subject to no deduction or only to deduction of fixed amount that is less than the current month's benefit.

² Total amount partly estimated; distribution by type of benefit not yet available.

Table 6.—Old-age and survivors insurance: Number of monthly benefits withheld, by reason for withholding payment and type of benefit, June 30, 1952

[Corrected to Sept. 24, 1952]

Reason for withholding payment ¹	Total	Old-age	Wife's or husband's	Widow's or widower's	Mother's	Parent's
Total.....	378,393	249,958	65,938	5,803	56,555	139
Self-employment of beneficiary.....	24,683	21,089	770	565	2,251	8
Employment of beneficiary.....	276,163	218,246	3,642	4,276	49,930	60
Employment of old-age beneficiary on whose wages benefit is based.....	52,953	.....	52,953	.....	.....	.....
Self-employment of old-age beneficiary on whose earnings benefit is based.....	6,336	.....	6,336	.....	.....	.....
Failure to have care of an entitled child.....	2,156	.....	186	.....	1,970	.....
Payee not determined.....	1,332	944	139	132	112	8
Administrative reasons.....	14,770	9,679	1,912	830	2,292	57

¹ Data for child's benefits withheld are not available.

² As provided under section 203 of the amended act except for the reason "payee not determined," in which case benefit payments are accrued pending determination of guardian or appropriate payee. When 2 or more reasons for with-

holding are reported simultaneously, the case is classified under the first reason listed. In all other instances in which 2 or more reasons apply, the first reported reason is the one recorded.

Table 7.—Employment security: Selected data on nonfarm placements and unemployment insurance claims and benefits, by State, August 1953

[Corrected to Sept. 22, 1952]

Region and State	Nonfarm place- ments	Initial claims ¹		Weeks of unemploy- ment covered by continued claims		Compensated unemployment					Average weekly insured unem- ployment under State programs ²
		Total	Women	Total	Women	All types of unemployment ³			Total unemployment		
						Weeks compen- sated	Benefits paid ⁴	Average weekly number of benefi- ciaries	Weeks compen- sated	Average weekly payment	
Total.....	588,166	715,618	253,614	4,670,644	1,778,389	4,115,526	\$95,389,083	970,887	3,781,809	\$24.06	⁵ 997,006
Region I:											
Connecticut.....	8,452	15,818	7,007	76,238	44,112	56,870	1,176,339	13,543	54,816	21.04	16,439
Maine.....	3,151	3,445	1,889	20,981	12,658	18,022	290,926	4,291	16,568	16.70	4,972
Massachusetts.....	17,898	33,658	15,347	225,697	110,826	206,170	4,858,816	49,088	193,088	24.30	50,881
New Hampshire.....	2,719	3,820	1,908	24,331	15,047	21,064	411,071	5,015	18,772	20.71	5,953
Rhode Island.....	2,356	12,258	5,439	63,129	34,539	56,477	1,231,372	13,447	54,468	22.11	14,699
Vermont.....	1,348	842	326	11,970	6,013	11,593	253,893	2,760	11,065	22.33	2,838
Region II:											
New Jersey.....	13,327	32,898	13,348	187,142	88,603	212,280	5,164,224	50,543	199,196	25.04	42,833
New York.....	72,698	135,696	60,300	620,282	275,400	559,725	13,849,198	133,208	474,511	26.77	136,438
Puerto Rico.....	1,816										
Virgin Islands.....	111										
Region III:											
Delaware.....	1,966	609	249	5,710	1,642	5,181	110,726	1,234	4,910	21.90	1,276
Pennsylvania.....	21,864	73,330	21,299	482,572	155,759	482,537	11,946,624	114,890	445,777	25.49	111,082
Region IV:											
Dist. of Col.....	3,600	1,283	487	7,594	3,409	6,573	119,016	1,565	6,466	18.14	1,790
Maryland.....	8,239	8,563	3,497	62,942	21,975	54,597	1,184,646	12,999	50,021	22.60	12,697
North Carolina.....	18,497	15,827	8,857	91,110	55,513	87,240	1,440,196	20,771	80,892	17.02	20,172
Virginia.....	9,630	5,066	2,136	44,431	23,720	42,156	755,453	10,037	40,463	18.23	10,212
West Virginia.....	2,143	11,316	3,427	81,274	14,051	86,887	1,774,885	20,687	73,609	21.76	18,394
Region V:											
Alabama.....	11,599	9,225	1,824	87,226	18,645	67,564	1,218,746	16,087	62,671	18.56	20,036
Florida.....	13,259	9,084	4,092	74,701	44,065	66,720	1,120,708	15,886	64,972	16.91	17,690
Georgia.....	15,823	8,482	4,432	69,398	33,380	52,321	900,716	12,457	48,921	17.59	14,327
Mississippi.....	8,333	5,346	1,497	36,326	10,368	29,047	616,794	6,916	29,711	18.28	8,560
South Carolina.....	11,570	7,527	3,059	41,998	20,088	30,712	544,330	7,312	28,791	18.22	8,674
Tennessee.....	11,894	12,234	4,381	92,846	35,830	79,810	1,335,655	19,002	76,132	16.98	21,041
Region VI:											
Kentucky.....	2,899	7,837	2,125	86,696	24,258	88,407	1,846,368	21,049	82,615	21.39	19,770
Michigan.....	13,707	76,093	11,985	609,664	109,312	482,120	13,505,847	114,790	472,916	23.29	107,071
Ohio.....	27,761	26,118	9,027	198,978	74,882	164,972	4,223,732	39,279	153,477	26.50	39,091
Region VII:											
Illinois.....	18,249	45,028	13,270	336,585	140,213	265,423	6,081,974	63,196	221,772	24.99	78,183
Indiana.....	11,182	20,514	5,012	142,366	37,092	163,068	4,051,302	38,826	154,020	25.46	27,552
Wisconsin.....	13,572	10,479	3,301	79,117	33,068	70,592	2,088,804	18,236	72,913	27.09	15,271
Region VIII:											
Minnesota.....	12,840	4,638	1,681	36,716	16,863	32,110	595,556	7,645	29,574	18.25	7,958
Montana.....	3,949	389	163	2,283	1,338	1,994	35,239	475	1,994	17.62	497
North Dakota.....	2,913	106	54	1,034	689	840	16,771	200	654	21.55	229
South Dakota.....	2,078	182	73	1,017	595	790	14,722	188	642	20.12	235
Region IX:											
Iowa.....	9,375	5,514	1,286	31,132	9,139	15,235	321,425	3,627	13,481	22.27	7,272
Kansas.....	9,661	2,183	710	15,254	4,505	15,913	366,925	3,789	14,314	24.09	3,171
Missouri.....	14,208	10,916	4,182	80,215	27,954	64,222	1,292,978	15,291	58,080	21.20	16,758
Nebraska.....	5,683	692	402	3,902	2,488	4,041	79,775	962	3,689	20.59	889
Region X:											
Arkansas.....	11,029	5,457	1,522	29,999	9,371	21,212	348,400	5,050	19,026	17.11	6,392
Louisiana.....	8,643	8,149	1,677	60,086	17,297	50,820	1,030,095	12,100	46,648	20.94	13,935
Oklahoma.....	13,821	5,175	1,433	31,773	12,123	28,106	528,350	6,692	26,561	19.19	7,382
Texas.....	48,370	7,736	2,434	49,832	18,714	38,127	640,279	9,078	36,418	17.12	11,380
Region XI:											
Colorado.....	8,666	666	326	4,828	1,794	4,350	91,680	1,036	4,084	21.55	1,041
New Mexico.....	5,015	822	181	4,421	1,183	4,396	94,220	1,047	4,103	22.01	1,044
Utah.....	6,218	1,081	559	6,101	3,233	5,427	126,076	1,292	4,793	24.20	1,376
Wyoming.....	1,556	135	66	863	367	787	18,342	187	667	24.70	164
Region XII:											
Arizona.....	5,612	2,298	653	9,117	4,298	6,183	124,526	1,472	5,875	20.34	2,173
California.....	40,262	50,353	22,099	289,695	153,965	260,232	5,770,079	61,960	239,176	22.93	67,874
Hawaii.....	984	1,556	515	10,506	4,291	8,548	165,060	2,035	7,507	20.87	(⁶)
Nevada.....	2,759	567	200	2,323	1,013	2,227	53,071	530	2,090	24.36	506
Region XIII:											
Alaska.....	986	546	212	3,916	1,750	4,461	180,782	1,062	4,231	29.45	(⁶)
Idaho.....	5,191	443	245	3,985	2,933	3,361	65,709	800	3,147	19.78	980
Oregon.....	8,929	5,068	1,716	28,392	14,091	26,337	558,143	6,271	24,678	21.78	6,650
Washington.....	9,785	9,020	2,704	50,956	23,327	41,670	982,819	9,921	39,904	23.08	12,158

¹ Excludes transitional claims.

² Total, part-total, and partial.

³ Not adjusted for voided benefit checks and transfers under interstate combined-wage plan.

⁴ Excludes Alaska and Hawaii.

⁵ Data not available.

Source: Department of Labor, Bureau of Employment Security, and affiliated State agencies.

Table 8.—Public assistance in the United States, by month, August 1951–August 1952¹

[Exclusive of vendor payments for medical care and cases receiving only such payments]

Year and month	Total	Old-age assistance	Aid to dependent children		Aid to the blind	Aid to the permanently and totally disabled	General assistance	Total	Old-age assistance	Aid to dependent children (families)	Aid to the blind	Aid to the permanently and totally disabled	General assistance						
			Families	Recipients															
				Total *										Children					
Number of recipients														Percentage change from previous month					
1951																			
August		2,732,021	612,128	2,103,208	1,567,218	97,349	111,329	319,000	-0.2	-1.0	+0.1	+2.2	-1.4						
September		2,722,933	606,078	2,084,104	1,558,249	97,158	113,049	311,000	-0.3	-1.0	-0.2	+1.5	-2.6						
October		2,711,620	597,249	2,055,463	1,532,255	97,185	114,923	311,000	-0.4	-1.5	(9)	+1.7	(9)						
November		2,705,413	591,992	2,039,163	1,520,326	97,221	118,284	316,000	-0.2	-0.9	(9)	+2.9	+1.6						
December		2,701,128	591,850	2,041,473	1,522,930	97,179	124,419	323,000	-0.2	(9)	(9)	+5.2	+2.2						
1952																			
January		2,693,990	593,618	2,047,286	1,527,796	97,215	128,468	339,000	-0.3	+0.3	(9)	+3.3	+6.1						
February		2,685,070	593,954	2,030,773	1,531,064	97,142	131,778	336,000	-0.3	+0.1	-0.1	+2.6	-0.9						
March		2,679,911	596,740	2,061,603	1,540,055	97,257	134,957	335,000	-0.2	+0.5	+0.1	+2.4	-0.5						
April		2,671,699	598,401	2,068,811	1,546,313	97,353	138,017	320,000	-0.3	+0.3	+0.1	+2.3	-4.5						
May		2,666,474	598,236	2,069,852	1,547,265	97,571	141,830	301,000	-0.2	(9)	+0.2	+2.8	-5.8						
June		2,659,661	589,968	2,041,549	1,527,353	97,690	145,345	294,000	-0.3	-1.4	+0.1	+2.5	-2.6						
July		2,650,157	578,155	2,006,321	1,501,148	97,670	148,132	307,000	-0.4	-2.0	(9)	+1.9	+4.5						
August		2,646,077	572,100	1,990,862	1,490,088	97,905	151,457	297,000	-0.2	-1.0	+0.2	+2.2	-3.0						
Amount of assistance														Percentage change from previous month					
1951																			
August	\$188,193,866	\$119,308,258		\$44,745,296		\$4,558,093	\$4,950,229	\$14,632,000	(9)	(9)	-0.6	+0.5	+2.1						
September	188,369,274	119,841,541		44,819,189		4,567,563	5,150,981	13,990,000	+0.1	+0.4	+0.2	+4.1	-4.4						
October	189,758,568	120,746,277		44,675,023		4,640,500	5,274,768	14,422,000	+0.7	+0.8	-0.3	+1.6	+2.4						
November	189,739,083	120,439,062		44,575,407		4,663,332	5,431,282	14,630,000	(9)	-0.3	-0.2	+0.5	+3.0						
December	190,820,555	120,290,184		44,866,070		4,671,872	5,779,429	15,204,000	+0.6	-0.1	+0.7	+0.2	+6.4						
1952																			
January	192,067,787	120,076,903		45,118,621		4,808,443	5,934,820	16,129,000	+0.7	-0.2	+0.6	+2.9	+2.7						
February	192,324,805	120,209,179		45,274,623		4,840,367	6,097,636	15,903,000	+0.1	+0.1	+0.3	+0.7	+2.7						
March	192,614,690	120,240,482		45,460,064		4,836,239	6,222,905	15,846,000	+0.2	(9)	+0.4	-0.1	+2.1						
April	192,165,737	120,106,071		45,713,331		4,851,436	6,363,899	15,131,000	-0.2	-0.1	+0.5	+0.3	+2.3						
May	191,430,861	120,390,263		45,505,911		4,875,654	6,565,033	14,094,000	-0.4	+0.2	-0.5	+0.5	+3.2						
June	190,026,202	120,199,838		44,768,504		4,883,935	6,694,925	13,479,000	-0.7	-0.2	-1.6	+0.2	+2.0						
July	191,360,823	120,542,635		44,175,800		4,943,745	6,842,643	14,856,000	+0.7	+0.3	-1.3	+1.2	+2.2						
August	189,823,105	120,436,985		43,639,078		4,959,964	6,983,078	13,804,000	-0.8	-0.1	-1.2	+0.3	+2.1						

¹ For definition of terms see the *Bulletin*, January 1951, p. 21. All data subject to revision.

² Includes as recipients the children and 1 parent or other adult relative in families in which the requirements of at least 1 such adult were considered in determining the amount of assistance.

³ Increase of less than 0.05 percent.

⁴ Decrease of less than 0.05 percent.

(Continued from page 20)

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work Service in a Period of Mobilization, by Jeannette Hanford; A Home Care Medical Program to Meet the Needs of Individuals and Families, by Virginia Insley; Homemaker Service as a Method of Serving Children, by Margaret Fitzsimmons; Constructive Aspects of Public Assistance for Children, by Crystal M. Potter and Amelia M. Igel; Casework Services Today in Institutions for Delinquent Children, by Norman V. Lourie; Casework Methods and Psychological Techniques in Selection of Adoption Applicants, by F. M. Kuhlman; and Fees for Social Welfare Services: Interpretation of Agency Policy, by Francis T. Levinson.

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Meeting, May 13-18, 1951, Atlantic City, N. J. Columbus, Ohio: The Conference, 1951. 144 pp. \$1.75.

The 20 papers include Applying New Knowledge About Group Behavior, by Ronald Lippitt; Services to Individuals Within a Group Work Setting, by Rosemary Reynolds; How Does the Public Look Upon Social Agencies in Time of Defense Mobilization and Preparation for War? by Robert E. Bondy; The Role of Health Services in Community Planning for Children and Youth, by Samuel Wishik; and Rallying Community Forces in Planning for the Aging, by Lucia J. Bing.

NEUMANN, FREDERIKA. "Administrative and Community Implications of Fee Charging." *Social Casework*, New York, Vol. 33, July 1952, pp. 271-277. 50 cents.

Table 9.—Amount of vendor payments for medical care for recipients of public assistance, by program and State, June 1952¹

State ²	Old-age assistance	Aid to dependent children	Aid to the blind	Aid to the permanently and totally disabled	General assistance ³
Alaska.....				(⁴)	\$10,732
Calif.....				(⁴)	52,235
Conn.....	\$163,674	\$27,480	\$1,545	(⁴)	(⁴)
Del.....	18	312			
D. C.....				85	108
Ill.....	1,643,489	59,658	37,778	81,320	362,925
Ind.....	271,195	48,198	10,854	(⁴)	125,593
Iowa.....				(⁴)	140,237
Kans.....	156,290	29,063	1,911	15,474	36,500
La.....	94	3,430	178	1,508	1,119
Maine.....				(⁴)	37,616
Mass.....	406,787	45,226		188,114	117,366
Mich.....	87,630		1,060	13,134	56,846
Minn.....	745,330	65,717	3,704	(⁴)	(⁴)
Mont.....					127,368
Nebr.....	205,829	8,206		421	(⁴)
Nev.....	2,489			(⁴)	4,700
N. H.....	56,048	16,146	2,107	136	(⁴)
N. J.....		12,912			73,249
N. Y.....	1,307,333	384,841	53,536	405,094	(⁴)
N. C.....	8,346	4,800		1,323	148,696
N. Dak.....	20,893	2,152		69	14,859
Ohio.....	238,648	5,658	8,870		420,777
Oreg.....					149,275
R. I.....	7,634		60	60	57,132
S. C.....					10,243
S. Dak.....					58,660
Utah.....	543	615	8	147	93
V. I.....	49	15		6	82
Va.....					7,901
Wis.....	287,686	77,873	8,662	4,873	74,387

¹ For June data excluding vendor payments for medical care, see the *Bulletin*, September 1952.

² Excludes States that made no vendor payments for medical care for June or did not report such payments. For the special types of public assistance, figures in italics represent payments made without Federal participation.

³ In all States except California, Illinois, Louisiana, Massachusetts, Nevada, New Jersey, Utah, and the Virgin Islands includes payments made on behalf of recipients of the special types of public assistance.

⁴ No program for aid to the permanently and totally disabled.

⁵ Data not available.

Table 10.—Average payments including vendor payments for medical care and average amount of vendor payments per assistance case, by program and State, June 1952¹

State ²	Old-age assistance	Aid to dependent children (per family)	Aid to the blind	Aid to the permanently and totally disabled
	All assistance	Vendor payments for medical care	All assistance	Vendor payments for medical care
Conn.....	\$68.57	\$6.00	\$112.30	\$6.00
Del.....			83.77	.48
D. C.....	52.55	.07	105.89	.07
Ill.....	53.65	14.21	111.73	2.62
Ind.....	41.79	6.20	72.73	5.73
Kans.....	50.18	3.67	96.94	6.97
La.....	50.01	(⁴)	64.00	.15
Mass.....	73.83	4.14	118.10	3.46
Mich.....	49.02	.96		54.21
Minn.....	58.33	13.45	106.31	8.47
Nebr.....	51.46	9.73	92.67	3.03
Nev.....	54.89	.91		
N. H.....	51.55	8.00	115.21	11.50
N. J.....			102.05	2.47
N. Y.....	64.86	11.17	117.86	7.35
N. C.....	24.78	.16	48.49	.29
N. Dak.....	33.40	2.36	98.61	1.37
Ohio.....	51.24	2.08	73.20	.43
R. I.....	48.72	.79		59.82
Utah.....	58.48	.08	108.37	.28
V. I.....	11.04	.07	16.37	.07
Wis.....	54.76	5.63	121.42	9.36

¹ For June data excluding vendor payments for medical care, see the *Bulletin*, September 1952. All averages based on cases receiving money payments for medical care, or both. Averages for general assistance not computed here because of difference among States in policy or practice regarding use of general assistance funds to pay medical bills for recipients of the special types of public assistance. Figures in italics represent payments made without Federal participation.

² Excludes States that made no vendor payments for medical care for June or did not report such payments.

³ No program for aid to the permanently and totally disabled.

⁴ Less than 1 cent.

⁵ Average payment not computed on base of less than 50 recipients.

Health and Medical Care

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PUFFER, RUTH R. "Application of Statistical Analysis in a Health Program." *Public Health Reports*, Washington, Vol. 67, Aug. 1952, pp. 729-736. 55 cents.

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"Social Security in Switzerland: Invalidity Assistance in the Canton of Geneva." *Industry and Labour*, Geneva, Vol. 8, Aug. 15, 1952, pp. 203-205. 25 cents.

TROTT, ELIZABETH HAY. "It Pays to Be Sick in Sweden." *Monetary Times*, Toronto, Vol. 120, Aug. 1952, pp. 22-25.

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WENKERT, WALTER. "Community Planning for Rehabilitation." *American Journal of Public Health and the Nation's Health*, New York, Vol. 42, July 1952, pp. 779-783. \$1. The New Haven program.

Table 11.—Old-age assistance: Recipients and payments to recipients, by State, August 1952¹

[Exclusive of vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	July 1952 in—		August 1951 in—	
				Number	Amount	Number	Amount
Total²	2,640,077	\$120,436,985	\$45.52	-0.2	-0.1	-3.1	+0.9
Ala.	71,226	1,549,363	21.75	-7.7	-4.4	-11.4	-10.4
Alaska	1,637	93,808	57.30	-7.4	+1.1	-1.0	+6.6
Ariz.	14,019	697,079	49.77	-2.2	(*)	-1.6	-2.8
Ark.	57,586	1,436,705	24.95	-3.3	+1.9	-8.3	+9.4
Calif.	272,848	18,037,418	66.11	(*)	-1.1	-6.6	-1.7
Colo. ³	51,681	3,642,357	70.46	+1.1	(*)	-1.1	-8.5
Conn.	16,890	1,055,229	62.48	-1.0	-1.1	-14.6	-11.9
Del.	1,747	62,492	35.77	+2.2	+6.6	+9.4	+32.6
D. C.	2,734	132,582	48.49	+2.6	-6.6	-4.0	-1.9
Fla.	67,008	2,615,861	39.04	(*)	+6.6	-3.3	-2.2
Ga.	95,204	2,978,491	31.29	+1.1	+2.2	-2.0	+26.1
Hawaii	2,178	73,206	33.61	-1.3	-3.3	-5.6	-5.4
Idaho	9,184	466,798	50.83	-2.2	-3.3	-4.2	+3.1
Ill.	109,139	4,559,813	41.78	-3.3	-1.1	-5.1	-14.1
Ind.	42,451	1,545,453	36.41	-6.6	-5.6	-11.1	-8.4
Iowa	47,591	2,472,282	51.95	(*)	-2.2	-2.9	+5.5
Kans.	36,780	1,639,456	44.57	(*)	+2.2	-3.3	+3.6
Ky.	55,707	1,079,567	30.15	(*)	-5.6	-10.8	-15.6
La.	120,609	6,030,250	50.00	-1.1	-1.1	+1.4	+8.9
Maine	14,055	608,396	43.29	-2.2	-1.1	-5.8	-4.8
Md.	11,206	471,204	42.05	+1.1	+3.3	-2.9	+4.1
Mass.	97,829	6,756,051	69.06	-1.1	+3.3	-3.7	+7.5
Mich.	90,485	4,512,458	49.87	-1.1	-2.2	-4.9	+7.7
Minn.	54,091	2,473,729	45.73	-3.3	-4.4	-1.6	-1.2
Miss.	88,471	1,304,684	22.31	+7.7	+1.0	-4.4	+20.2
Mo.	130,911	5,977,314	45.66	-2.2	-2.2	-7.7	+4.7
Mont.	10,920	501,743	54.19	-6.6	-5.6	-5.7	-8.8
Nebr.	20,324	861,863	42.41	-1.2	-1.3	-10.1	-17.6
Nev.	2,701	146,396	54.19	-3.3	-4.4	-3.0	-4.8
N. H.	6,997	305,330	43.64	-2.2	+6.6	-1.9	-2.9
N. J.	22,008	1,212,451	55.09	(*)	-1.0	-4.7	+4.7
N. Mex.	10,714	458,557	42.80	(*)	+1.8	(*)	+11.0
N. Y.	112,673	6,264,790	55.69	-5.6	-7.7	-4.2	+1.0
N. C.	51,152	1,275,821	24.94	-3.3	+2.2	-16.4	-7.9
N. Dak.	8,722	449,700	51.58	(*)	-2.2	-2.8	-5.5
Ohio	114,030	5,610,981	49.21	-4.4	-4.4	-4.4	+5.0
Okl.	95,185	5,451,480	57.27	(*)	+4.4	-2.4	+14.7
Oreg.	22,289	1,288,198	57.80	-4.4	-5.6	-3.6	+7.7
Pa.	71,020	2,793,870	39.34	-7.7	-4.4	-9.6	-7.7
P. R.	39,860	294,272	7.38	+3.3	+1.9	+120.8	+113.3
R. I.	9,175	426,615	46.50	-6.6	(*)	-5.9	-8.5
S. C.	42,240	1,154,861	27.34	-3.3	(*)	-1.9	+6.4
S. Dak.	11,710	494,560	42.23	-2.2	(*)	-3.0	+4.4
Tenn.	39,347	1,942,926	32.74	+1.1	(*)	-6.0	+5.7
Tex.	218,127	7,360,647	33.74	(*)	(*)	-1.2	+1.6
Utah	6,726	540,669	80.59	(*)	-4.4	-1.0	+5.6
Vt.	6,967	280,905	40.19	-3.3	(*)	+1.2	+5.6
V. I.	687	7,536	11.00	+1.8	+1.8	+7.7	+14.1
Va.	18,386	434,671	23.64	-6.6	+5.6	-5.7	+4.4
Wash.	66,595	4,148,796	62.30	-2.2	(*)	-4.0	-2.8
W. Va.	26,360	741,669	28.14	+2.2	-2.2	+1.6	+9.4
Wis.	50,756	2,495,227	49.16	-3.3	-3.3	-2.6	+3.4
Wyo.	4,139	230,648	55.73	-6.6	-4.4	-4.1	-4.3

¹ For definition of terms see the *Bulletin*, January 1951, p. 21. All data subject to revision.
² Includes 3,883 recipients under 65 years of age in Colorado and payments to these recipients. Such payments are made without Federal participation.
³ Decrease of less than 0.05 percent.
⁴ Increase of less than 0.05 percent.

Table 12.—Aid to the blind: Recipients and payments to recipients, by State, August 1952¹

[Exclusive of vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	July 1952 in—		August 1951 in—	
				Number	Amount	Number	Amount
Total²	97,905	\$4,959,964	\$50.66	+0.2	+0.3	+0.6	+8.6
Total, 52 States³	97,865	4,957,691	50.66	+2	+3	+3.5	+11.6
Ala.	1,514	37,642	24.86	+9	+1.6	-2.4	+5.1
Alaska	30	1,586	(*)	(*)	(*)	(*)	(*)
Ariz.	699	38,285	54.77	-6	+1	-9.2	-10.1
Ark.	1,879	63,056	33.56	+1	+2	-3.9	+24.8
Calif. ⁴	11,656	948,044	81.34	+3	+3	-3.6	+2.3
Colo.	344	22,065	64.14	+6	+7	-1.0	+2.7
Conn.	305	22,505	73.79	-1.0	+3.3	-1.0	+7.5
Del.	227	10,509	46.30	+9	+4	+9.7	+12.8
D. C.	255	13,213	51.82	-8	+3	-1.9	-1.3
Fla.	3,143	136,331	43.38	+1	+5	-5.0	-2
Ga.	2,984	108,941	36.51	+3	+2	+4.0	+30.3
Hawaii	103	4,226	40.25	+1.9	+4	-9.5	-5.1
Idaho	198	10,778	54.43	-5	-7	-4.8	-2.5
Ill.	3,935	192,962	49.04	-1	-3	-4.8	-7.2
Ind.	1,704	67,254	39.47	-4	-2	-4.0	-1.6
Iowa	1,295	80,266	61.98	+3	+3	+2.2	+7.1
Kans.	592	33,048	55.82	-1.2	-1.2	-7.6	-3
Ky.	2,394	76,650	32.02	+3	+8	-4.2	-2.5
La.	1,914	89,838	46.94	0	+1	+1.3	+4.6
Maine	579	28,734	49.17	-9	-8	-10.0	-8.7
Md.	468	22,098	47.22	+2	+5	-4.3	+2.6
Mass.	1,677	136,978	81.65	+2	-2	+6.9	+17.2
Mich.	1,834	104,428	56.94	+1	-4	-4.4	-7.9
Minn.	1,128	71,361	63.26	-1.3	+2	-1.3	-2.3
Miss.	2,914	76,696	26.32	+1.4	+1.6	+4.4	+17.4
Mo.	3,371	168,550	50.00	+1.1	+1.1	+22.0	+22.5
Mont.	522	31,313	59.99	+6	+8	-3.9	+2.3
Nebr.	746	48,252	64.68	-7	+2	-7	+1.9
Nev.	40	2,773	(*)	(*)	(*)	(*)	(*)
N. H.	295	14,482	49.09	-1.3	-1.9	-3.9	-3.4
N. J.	819	51,186	62.50	-2	-6	+3.8	+12.5
N. Mex.	441	17,356	39.36	-2.0	-3	-13.7	-5.9
N. Y.	4,137	268,193	64.83	+3	+9	-1.4	+6.2
N. C.	4,434	153,192	34.55	-6	-7	-1.1	-5
N. Dak.	116	6,034	52.02	+2.7	-9.6	+2.7	-7.2
Ohio	3,713	182,287	49.09	-4	-2	-2.5	+9.1
Okl.	2,487	158,474	63.72	-2	+1.5	-4.7	+17.2
Oreg.	374	25,196	67.37	-1.1	-1.8	-4.8	-2.0
Pa.	15,723	779,436	49.57	+4	+4	+2.1	+27.7
P. R.	873	6,202	7.10	+12.5	+7.3	+88.6	+88.0
R. I.	181	10,418	57.56	+6	+1.0	0	+5.5
S. C.	1,668	45,527	28.49	+6	+9	-1.4	+1.4
S. Dak.	201	8,112	40.36	-1.0	+3	-8.6	-8.9
Tenn.	2,828	112,769	39.88	+8	+1.1	+3.2	+10.0
Tex.	6,028	229,532	38.08	+2	+3	-1.1	+1.9
Utah	221	13,242	59.92	+5	-1	+2.3	+10.0
Vt.	171	7,656	44.77	-1.2	-4.4	-3.9	+3
V. I.	44	474	(*)	(*)	(*)	(*)	(*)
Va.	1,427	45,635	31.98	-3	-3	-6.1	-2.1
Wash. ⁵	823	64,463	78.33	+6	+6	-2.9	+2.2
W. Va.	1,122	37,523	33.44	-4	-5	+4.2	+12.3
Wis.	1,305	71,626	54.89	-1.0	-1.1	-5.7	-1.4
Wyo.	92	5,067	55.08	(*)	(*)	(*)	(*)

¹ For definition of terms see the *Bulletin*, January 1951, p. 21. Figures in italics represent program administered without Federal participation. All data subject to revision.
² Data include recipients of payments made without Federal participation and payments to these recipients in California (522 recipients, \$43,751 in payments), in Washington (11 recipients, \$469 in payments), in Missouri (96 recipients, \$47,171 in payments), and in Pennsylvania (6,311 recipients, \$598,471 in payments). State plans for aid to the blind in Missouri and Pennsylvania were approved under the Social Security Act Amendments of 1950.
³ States with plans approved by the Social Security Administration. In computing percentages, data for Missouri for August 1951 were excluded because the State did not have an approved plan in that month. See also footnote 2.
⁴ Average payment not computed on base of less than 50 recipients; percentage change, on less than 100 recipients.
⁵ Excludes cost of medical care, for which payments are made to recipients quarterly.

Table 13.—Aid to dependent children: Recipients and payments to recipients, by State, August 1952¹

[Exclusive of vendor payments for medical care and cases receiving only such payments]

State	Number of families	Number of recipients		Payments to recipients			Percentage change from—			
		Total ²	Children	Total amount	Average per—		July 1952 in—		August 1951 in—	
					Family	Recipient	Number of families	Amount	Number of families	Amount
Total.....	572,100	1,990,862	1,490,088	\$43,639,078	\$76.28	\$21.92	-1.0	-1.2	-6.5	-2.5
Total, 52 States ³	572,071	1,990,757	1,490,012	43,637,924	76.28	21.92	-1.0	-1.2	-6.5	-2.5
Alabama.....	17,886	64,747	50,404	636,300	35.58	9.83	+1.1	+5.5	-4.1	-6.2
Alaska.....	763	2,510	1,822	56,942	74.63	22.69	+1.1	+6.6	+10.6	+16.6
Arizona.....	3,520	13,382	10,073	263,796	74.94	19.71	-1.3	-5.5	-8.8	-9.7
Arkansas.....	12,843	47,535	36,319	559,912	43.60	11.78	-1.1	+5.5	-14.2	+5.5
California.....	52,726	196,437	125,935	6,145,828	116.56	36.93	-2.1	-2.4	-6.6	-2.5
Colorado.....	4,839	17,915	13,583	476,482	98.47	26.60	-2.2	-6.6	-9.6	-4.4
Connecticut.....	4,434	14,581	10,644	470,633	106.14	32.28	-1.6	-2.2	-18.0	-18.6
Delaware.....	729	2,855	2,201	63,179	86.67	22.13	+8.8	+2.6	+1.5	+8.2
District of Columbia.....	1,976	8,124	6,335	194,442	98.40	23.93	+7.8	+1.3	-7.5	-5.6
Florida.....	17,362	58,672	43,908	850,674	48.36	14.50	+7.7	+1.3	-26.3	-9.6
Georgia.....	14,239	48,661	37,097	771,635	54.19	15.86	-5.7	-3.7	-27.3	-14.9
Hawaii.....	3,035	11,174	8,746	262,014	86.33	23.45	-2.8	-6.6	-7.3	-4.8
Idaho.....	1,965	6,857	5,049	219,737	111.83	32.05	-2.6	-2.6	-13.9	-8.1
Illinois.....	22,348	80,768	60,029	2,494,333	111.61	30.88	-1.1	+1.1	-1.2	+3.5
Indiana.....	8,111	27,453	20,333	552,998	68.18	20.14	-5.5	-4.4	-14.6	-11.7
Iowa.....	5,422	19,051	14,157	570,786	105.27	29.96	+3.3	(⁴)	+5.1	+13.7
Kansas.....	3,800	13,721	10,423	349,815	90.63	25.49	-1.8	-1.6	-13.3	-6.1
Kentucky.....	19,565	69,550	51,501	1,034,596	53.04	14.88	+2.2	+5.5	-13.6	+9.0
Louisiana.....	22,220	81,858	61,103	1,410,603	63.48	17.23	-8.8	-1.2	-3.3	+23.6
Maine.....	4,273	14,965	10,854	313,171	73.29	20.93	-1.2	-1.3	-3.3	-3.4
Maryland.....	4,969	19,244	14,707	451,968	90.96	23.49	+7.7	+1.3	-11.0	-2.6
Massachusetts.....	12,787	42,170	31,063	1,473,425	115.23	34.94	-1.2	-1.2	-1.8	+4.1
Michigan.....	24,952	80,927	57,648	2,438,366	97.72	30.13	-6.6	-7.7	+1.1	+7.0
Minnesota.....	7,377	25,110	19,180	729,177	98.84	29.04	-9.9	-1.0	-4.6	-1.8
Mississippi.....	10,318	39,263	30,272	272,956	26.45	6.95	-9.9	-3.3	-1.3	+35.2
Missouri.....	21,087	71,603	52,847	1,113,369	52.80	15.55	-1.6	-1.5	-9.7	-8.7
Montana.....	2,212	7,683	5,698	205,222	92.78	26.71	-1.3	-2.4	-6.0	+1.4
Nebraska.....	2,589	8,847	6,521	234,139	90.44	26.47	-1.9	-1.6	-21.7	-18.5
Nevada.....	89	105	76	1,154	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)	(⁵)
New Hampshire.....	1,231	4,236	3,086	126,764	102.98	29.93	-4.6	-2.4	-16.3	-14.3
New Jersey.....	4,964	16,549	12,508	502,043	101.14	30.34	-1.2	-1.1	-2.8	+4.9
New Mexico.....	5,209	18,222	14,048	339,112	65.10	18.61	-1.8	+3.8	-6.8	+14.3
New York.....	50,130	170,586	122,237	5,625,021	112.21	32.97	-2.0	-1.9	-5.7	-2.3
North Carolina.....	16,625	60,440	46,279	805,794	48.47	13.33	-1.1	-1.0	+1.9	+7.5
North Dakota.....	1,492	5,273	3,987	144,126	96.60	27.33	-1.1	-1.0	-9.5	-1.2
Ohio.....	12,911	47,870	36,093	947,500	73.39	19.79	-8.8	-7.7	-9.5	-4.4
Oklahoma.....	18,686	62,965	47,740	1,280,058	68.50	20.32	-2.9	-6.2	-12.9	-17.3
Oregon.....	2,764	9,106	6,707	276,530	100.05	30.37	-9.9	-1.4	-12.7	-10.1
Pennsylvania.....	29,363	108,134	81,032	2,588,118	88.14	23.93	-1.0	-4.4	-20.6	-17.1
Puerto Rico.....	28,072	86,969	65,568	256,966	9.15	2.95	+2.6	+1.0	+138.1	+140.5
Rhode Island.....	3,264	10,906	7,878	306,592	93.93	28.11	-8.8	-5.5	+3.3	+7.4
South Carolina.....	6,242	23,423	18,218	256,759	41.13	10.96	-6.3	-18.2	-5.7	+3.5
South Dakota.....	2,588	8,496	6,401	188,620	72.88	22.20	+3.3	+1.3	-8.8	+3.5
Tennessee.....	19,792	71,673	53,840	967,002	48.86	13.49	-2.2	-2.2	-10.6	-7.9
Texas.....	15,260	59,427	44,404	806,840	52.87	13.58	-3.3	+7.7	-16.8	-7.1
Utah.....	2,761	9,623	7,102	297,653	107.81	30.93	-2.2	+2.2	-10.6	-9.0
Vermont.....	996	3,465	2,671	52,841	53.05	15.25	-6.6	-2.3	-2.9	-3.5
Virgin Islands.....	220	689	608	3,638	16.54	5.28	-9.9	-1.2	+17.6	+26.2
Virginia.....	7,358	27,770	21,183	402,076	54.64	14.48	-7.7	+1.8	-9.3	-1.9
Washington.....	8,513	28,540	20,784	876,966	103.01	30.73	-1.6	-2.6	-14.6	-7.4
West Virginia.....	16,533	61,578	47,767	1,022,612	61.85	16.61	-5.5	+1.8	-4.6	+2.6
Wisconsin.....	8,033	27,341	20,083	890,149	111.93	32.89	-1.0	-7.7	-4.4	-1.0
Wyoming.....	487	1,783	1,336	48,654	99.91	27.29	-1.4	-1.4	-15.6	-12.5

¹ For definition of terms see the *Bulletin*, January 1951, p. 21. Figures in italics represent program administered without Federal participation. All data subject to revision.

² Includes as recipients the children and 1 parent or other adult relative in families in which the requirements of at least 1 such adult were considered in determining the amount of assistance.

³ States with plans approved by the Social Security Administration.

⁴ Excludes cost of medical care, for which payments are made to recipients quarterly.

⁵ Increase of less than 0.05 percent.

⁶ Average payment not computed on base of less than 50 families; percentage change, on less than 100 families.

⁷ In addition to these payments from aid to dependent children funds, supplemental payments of \$110,217 from general assistance funds were made to 3,409 families.

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of the State unemployment insurance programs. As a result of the rise

in both the average weekly number of claimants and the average weekly payment, total benefits paid to unemployed workers increased to \$95.4

million. This total is 7.6 percent higher than that for July and 27.0 percent more than the amount paid in August 1951.

Table 14.—Aid to the permanently and totally disabled: Recipients and payments to recipients, by State, August 1952¹

[Exclusive of vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from July 1952 in—	
		Total amount	Average	Number	Amount
Total.....	151,457	\$6,983,078	\$46.11	+2.2	+2.1
Alabama.....	8,650	199,556	23.07	+1.8	+1.6
Arkansas.....	308	8,164	26.51	+18.5	+18.1
Colorado.....	3,732	197,414	52.90	-2	+2.4
Delaware.....	138	6,846	49.61	-7	-1
Dist. of Col.....	1,320	72,658	55.04	+2.7	+3.1
Georgia.....	192	6,686	34.82	(²)	(²)
Hawaii.....	1,111	52,942	47.65	-1.3	+2.2
Idaho.....	811	42,821	52.80	+5	+8
Illinois.....	3,184	134,570	42.26	+3.4	+3.9
Kansas.....	2,718	141,462	52.05	+3	+1.2
Louisiana.....	14,945	604,064	40.42	+1	(²)
Maryland.....	2,795	133,346	47.71	+1.8	+1.7
Massachusetts.....	6,000	379,660	63.28	+6.0	+7.8
Michigan.....	1,179	74,082	62.83	+3.0	+3.8
Mississippi.....	1,005	19,490	19.39	+5.0	+5.5
Missouri.....	11,796	548,981	46.66	+8	+5
Montana.....	1,137	66,825	58.77	+2.7	+2.8
New Hampshire.....	28	1,654	(²)	(²)	(²)
New Jersey.....	1,063	107,735	64.78	+4.3	+8.8
New Mexico.....	2,237	92,956	41.55	-4	+9.1
New York.....	30,453	1,895,609	62.18	-5	+1
North Carolina.....	5,559	159,331	28.66	+2.8	+4.3
North Dakota.....	967	38,688	58.00	+5	-1.7
Ohio.....	5,415	253,043	44.88	+2.9	+3.2
Oklahoma.....	2,943	171,777	58.37	+6.3	+7.6
Oregon.....	1,949	138,069	70.84	+1.5	+2.7
Pennsylvania.....	9,810	440,488	44.90	+1	+3
Puerto Rico.....	8,685	69,230	7.97	+16.3	+8.9
Rhode Island.....	323	18,557	57.45	+7.3	+8.7
South Carolina.....	4,935	156,025	31.62	+2.8	+2.6
South Dakota.....	230	10,604	42.42	+5.9	+6.8
Utah.....	1,548	90,224	58.28	+4	+7
Vermont.....	215	9,175	42.67	+2.4	+3.2
Virgin Islands.....	30	232	(²)	(²)	(²)
Virginia.....	3,293	110,902	33.68	+1.5	+1.7
Washington.....	5,382	336,502	62.52	+1.0	+1.2
West Virginia.....	3,621	115,998	32.03	+9.6	+9.0
Wisconsin.....	1,070	63,903	63.33	+2.3	+2.4
Wyoming.....	461	24,809	53.82	-2.1	-2.4

¹ For definition of terms see the *Bulletin*, January 1951, p. 21. All data subject to revision.

² Average payment not computed on base of less than 50 recipients; percentage change, on less than 100 recipients.

³ Decrease of less than 0.05 percent.

Table 15.—General assistance: Cases and payments to cases, by State, August 1952¹

[Exclusive of vendor payments for medical care and cases receiving only such payments]

State	Number of cases	Payments to cases		Percentage change from—			
		Total amount	Average	July 1952 in—		August 1951 in—	
				Number	Amount	Number	Amount
Total ²	297,000	\$13,804,000	\$46.40	-3.0	-7.1	-6.9	-5.7
Ala.....	172	4,096	23.81	+10.3	+3.7	+55.0	+57.1
Alaska.....	63	2,827	44.87	-47.5	-43.9	(²)	(²)
Ariz.....	1,322	60,607	45.84	+8.4	+7.6	+10.3	+28.3
Ark.....	2,157	28,756	13.33	-2.0	-5	-14.4	-12.3
Calif.....	28,849	1,246,289	46.42	-2.3	-2.2	-9.9	-8.0
Colo.....	1,772	74,026	41.78	-1.4	-5.2	-7.8	+2.6
Conn.....	4,065	218,285	53.70	+3.0	+6.0	+19.7	+19.7
Del.....	700	27,442	39.20	+7	+5	-19.0	-3.7
D. C.....	712	39,508	55.49	+1.1	+2.0	-15.3	-18.8
Fla.....	5,100	81,000					
Ga.....	3,373	58,091	17.22	-2	+3	+1.3	+4.2
Hawaii.....	1,612	88,194	54.71	-3.6	-1.7	-33.6	-24.4
Idaho.....	139	5,208	37.47	-1.4	0	-31.2	-28.1
Ill.....	25,443	1,482,158	58.25	-2.7	-2.5	-8.2	-3.6
Ind.....	16,600	623,000					
Iowa.....	3,316	98,817	29.80	-5	-8	+3.3	+10.3
Kans.....	1,891	87,244	46.14	+1.1	+1.1	-13.2	-6.9
Ky.....	2,877	75,081	26.10	+8.1	+4.2	+11.3	+14.4
La.....	7,009	296,539	38.03	-1.5	-2.6	+16.4	+49.1
Maine.....	2,594	109,438	42.19	-4.2	-3.0	-2.0	-4.7
Md.....	2,951	143,000	48.46	-1.2	-1.5	-13.2	-8.3
Mass.....	13,305	676,645	50.86	-3.3	-7.2	-29.0	-33.0
Mich.....	15,638	873,115	55.83	-3.7	-2.0	-17.8	-6
Minn.....	6,223	283,026	47.09	-9.7	-19.2	+18.3	+21.4
Miss.....	830	10,575	12.74	(²)	(²)	-9.4	+3.4
Mo.....	9,333	306,321	32.82	+1.4	+1.6	-10.3	-2.9
Mont.....	530	15,946	30.09	-3.5	-4.6	-28.5	-29.1
Nebr.....	1,219	45,832	37.60	+1.0	+3.6	-1.7	-1.6
Nev.....	330	8,500	25.76	+10.0	-5.6	0	-3.4
N. H.....	974	37,207	38.20	-1	-8.0	-17.0	-13.8
N. J.....	5,923	379,799	64.12	-2.5	-3.4	-22.0	-19.8
N. Mex.....	223	8,116	22.94	-7.9	-6.1	-58.9	-28.8
N. Y.....	29,056	2,847,314	72.90	-4.6	-6.0	-23.3	-25.5
N. C.....	2,034	43,533	21.40	-1.6	-5	-8.0	+0.2
N. Dak.....	300	11,374	37.91	-7.1	-7.2	-25.9	-15.7
Ohio.....	23,828	951,656	39.94	-7.0	-16.1	+21.5	+28.3
Okl.....	6,300	83,951	(²)	(²)	+4	(²)	-19.4
Ore.....	3,865	225,657	58.38	-3.3	-1.8	+13.0	+4.9
Pa.....	22,445	1,054,445	46.98	-8.5	-30.2	+12.7	+30.9
P. R.....	1,654	11,616	7.02	-1.5	-1.8	-69.3	-70.0
R. I.....	3,871	231,087	59.70	-6.0	-3.6	-9.5	-1.3
S. C.....	2,089	35,043	16.78	-2.1	+2.6	-29.6	-33.3
S. Dak.....	590	16,200					
Tenn.....	2,034	29,649	14.58	-2.5	-4	-5.4	+6.3
Tex.....	9,700	140,000					
Utah.....	1,110	61,454	55.36	-4.4	-6.4	-4.1	+6
Vt.....	1,000	32,000					
V. I.....	239	2,367	9.90	-8	-2.1	+3.0	+2.2
Va.....	2,010	55,700	27.71	+6	+1.9	-29.0	-22.2
Wash.....	6,446	344,189	53.40	-2.9	-2.3	-12.0	-12.0
W. Va.....	3,229	81,883	25.43	-2.6	-3.4	-30.0	-19.2
Wis.....	5,040	274,179	54.40	(²)	+9	+10.1	+19.2
Wyo.....	169	4,563	41.80	-12.8	-8.21	+6.9	+26.1

¹ For definition of terms see the *Bulletin*, January 1951, p. 21. All data subject to revision.

² Partly estimated; does not represent sum of State figures because total excludes for Indiana and New Jersey payments made for, and an estimated number of cases receiving, medical care, hospitalization, and burial only.

³ Percentage change not computed on base of less than 100 cases.

⁴ State program only; excludes program administered by local officials.

⁵ About 12 percent of this total is estimated.

⁶ Partly estimated.

⁷ Excludes assistance in kind and cases receiving assistance in kind only and, for a few counties, cash payments and cases receiving cash payments. Amount of payments shown represents about 60 percent of total.

⁸ Includes unknown number of cases receiving medical care, hospitalization, and burial only, and total payments for these services.

⁹ Estimated.

¹⁰ Not computed; July data estimated.

¹¹ Includes cases receiving medical care only.

¹² Includes 6,110 cases and payments of \$182,094 representing supplementation of other assistance programs.

¹³ Excludes estimated duplication between programs; 2,344 cases were aided by county commissioners and 4,495 cases under program administered by Oklahoma Emergency Relief Board. Average per case and percentage changes not computed.

¹⁴ Estimated on basis of reports from a sample of cities and towns.

¹⁵ Increase of less than 0.05 percent.